PAGE 1 / 78

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Auti	nonzea Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
WOMEN SPEAK OUT	「PAC		
ADDRESS (number and street)	1200 NEW HAMPSHIRE AV	'E NW	
▼ Check if different	SUITE 750		
than previously reported. (ACC)	WASHINGTON		DC 20036 -
2. FEC IDENTIFICATION N	UMBER ▼ CIT	YA	STATE ▲ ZIP CODE ▲
C C00530766		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M 20 (M3) Jun 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:			(Non-Election Year Only)
April 15 Quarterly Report (O1)	20 (M4) Jul 20 (M7	
July 15 Quarterly Report (O2) PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (0	Report for the: Q3)	Convention (12C)	Special (12S)
January 31 Year-End Report (YE) Election	n on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Election Report for the:	X General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	t Electio	n on 11 / 08	in the State of
5. Covering Period 1	0 20 2016	through 11	M / D D / Y Y Y Y Y Y Z Y Z Z Z Z Z Z Z Z Z Z Z
I certify that I have examined the Type or Print Name of Treasure	Buchanan, Emily, , ,	my knowledge and belief it is	true, correct and complete.
Typo of Finit Name of Heasule	<u> </u>		
Signature of Treasurer	hanan, Emily, , ,	[Electronically Filed]	Date 05 17 2017
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signing	g this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

_	FEC Form 3X (Rev. 05/2016)	OF RECEIPTS AND DISBURSEMENTS	Page 2
	Vrite or Type Committee Name		
_	WOMEN SPEAK OUT PAC		
F	Report Covering the Period: From:	10 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	: 11 28 2016
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		496911.89
	(b) Cash on Hand at Beginning of Reporting Period	407295.58	
	(c) Total Receipts (from Line 19)	112985.30	1255877.90
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	520280.88	1752789.79
7.	Total Disbursements (from Line 31)	473660.04	1706168.95
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	46620.84	46620.84
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	35918.99	
	This committee has qualified as a multi	candidate committee. (see FEC FORM 1M)	
		For further information contact:	
		Federal Election Commission 999 E Street, NW Washington, DC 20463	
		Toll Free 800-424-9530 Local 202-694-1100	

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

WOMEN SPEAK OUT PAC

50323.30 68289.74 112985.30 1245234.17 0.00 0.00 0.00	Report Covering the Period: From:	20 2016 To	: 11 28 2016
	I. Receipts		
	1. Contributions (other than loans) From:		
	(a) Individuals/Persons Other		
112985.30 1245234.17 0.00 0.00 0.00 112985.30 1245234.17 0.00	Than Political Committees (i) Itemized (use Schedule A)	62662.00	1176944.43
0.00 0.00 0.00 0.00 0.00 0.00 0.	(ii) Unitemized(iii) TOTAL (add	50323.30	68289.74
	Lines 11(a)(i) and (ii)	112985.30	1245234.17
112985.30 1245234.17 0.00 0.00 0.00 0.00 0.00 10643.73 0.00	(b) Political Party Committees	0.00	0.00
0.00 0.00 0.00 0.00 0.00 0.00 10643.73 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
0.00 0.00 0.00 0.00 0.00 0.00 10643.73 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	112985.30	1245234.17
0.00 0.00 0.00 0.00 10643.73 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	2. Transfers From Affiliated/Other Party Committees	0.00	0.00
0.00 10643.73 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	3. All Loans Received	0.00	0.00
0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00	4. Loan Repayments Received 5. Offsets To Operating Expenditures	0.00	0.00
0.00 0.00 -unds 0.00 0.00 0.00 0.00 0.00	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	10643.73
-unds 0.00 0.00 0.00 0.00 0.00	to Federal Candidates and Other Political Committees	0.00	0.00
0.00 0.00 0.00 0.00	C. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
0.00 0.00	(a) Non-Federal Account		
) 0.00 0.00	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
► 112985.30 1255877.90	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
	8. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)	0.00	125

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)	1500 1000	Jaionda Tear-to-Date
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	139450.06	618579.87
Expenditures(c) Total Operating Expenditures	139430.00	0103/3.07
(add 21(a)(i), (a)(ii), and (b))▶	139450.06	618579.87
Transfers to Affiliated/Other Party Committees	0.00	0.00
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	4 4 4	
(use Schedule E)	334209.98	1087589.08
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
Loans Made	0.00	0.00
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	0.00	4 4 4
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
Other Disbursements (Including		
Non-Federal Donations)	0.00	0.00
Federal Election Activity (52 U.S.C. § 30101 (a) Allocated Federal Election Activity (from Schedule H6)	1(20))	
(i) Federal Share	0.00	0.00
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00
Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
Total Disbursements (add Lines 21(c), 22,		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	473660.04	1706168.95
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	473660.04	1706168.95

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

FEC FORM 3X (Rev. 05/2016)		Page 3
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	112985.30	1245234.17
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	112985.30	1245234.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	139450.06	618579.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	10643.73
38. Net Operating Expenditures (subtract Line 37 from Line 36)	139450.06	607936.14

	FOR LINE NUMBER:						6	OF	78
(check only one)									
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

	y information copied from such Reports and State for commercial purposes, other than using the n							
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC							
Α.	Full Name of Individual (Last, First, Middle Initial Aultman, Kathi, , ,) or Full Org	anization Name	Date of Receipt				
	Mailing Address 1469 Winfred Drive East			11 04 2016				
	City	State	Zip Code	Transaction ID : SA11AI.8902				
	Orange Park	FL	32073	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		500.00				
	Name of Employer (for Individual) Retired	Occup Retire	ation (for Individual) d	Memo Item				
	Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00					
В.	Full Name of Individual (Last, First, Middle Initial Balzarini, Elizabeth, , ,) or Full Org	anization Name	Date of Receipt				
	Mailing Address 30206 N 117th Drive	1-		10 27 2016				
	City Peoria	State AZ	Zip Code 85383-8254	Transaction ID : SA11AI.7496				
	FEC ID number of contributing federal political committee.	C	03303-0234	Amount of Each Receipt this Period 250.00				
	Name of Employer (for Individual) Homemaker	Occup	ation (for Individual) maker	Memo Item				
	Receipt For: 2016 Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 250.00					
<u></u>	Full Name of Individual (Last, First, Middle Initia Bellissimo, Kimberly, , ,) or Full Org	anization Name	Date of Receipt				
	Mailing Address 1155 15th Street Northwest Suit	e 4		10 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	City Washington	State DC	Zip Code 20005-2748	Transaction ID : SA11AI.7131				
	FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 250.00				
	Name of Employer (for Individual) ForthRight Strategy		ation (for Individual)	Memo Item				
	Receipt For: 2016 Primary S General Other (specify)	Aggregate Ye	ear-to-Date ▼ 250.00					
s	UBTOTAL of Receipts This Page (optional)			1000.00				
Т	OTAL This Period (last page this line number on	ly)						

F	FOR LINE NUMBER:					PAGE	=	7	OF	78
(0	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle In Buerger, Mary, , , Mailing Address 115 Stony Ridge Court City Hillsdale FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: 2016 Primary X General	State Zip Code MI 49242-1154 C Occupation (for Individual) Retired Aggregate Year-to-Date 250.00	Date of Receipt 11 02 2016 Transaction ID: SA11AI.8349 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle In Burch, Brian, , , Mailing Address 5245 North 21st Street City Phoenix FEC ID number of contributing federal political committee. Name of Employer (for Individual) Brighton Devevlopment Receipt For: 2016 Primary ★ General Other (specify) ▼	1 7 1 7 1 7	Date of Receipt 11 01 2016 Transaction ID: SA11AI.8122 Amount of Each Receipt this Period 1000.00 Memo Item
Full Name of Individual (Last, First, Middle In Carlson, Carol, J., , Mailing Address 14750 Beach Boulevard Apt. City Jacksonville Beach FEC ID number of contributing federal political committee. Name of Employer (for Individual) Homemaker Receipt For: 2016 Primary General Other (specify)		Date of Receipt 11 01 2016 Transaction ID: SA11AI.8123 Amount of Each Receipt this Period 1000.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	2250.00
TOTAL This Period (last page this line number	only)	

	FOR LINE NUMBER:						8	OF	78
(check only one)									
	X	11a		11b		11c	12	2	
		13		14		15	16	6	17

Any information copied from such Reports an or for commercial purposes, other than using			erson for the purpose of soliciting contributions to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC								
Full Name of Individual (Last, First, Middle Cates, Rebecca, , ,	Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Cates, Rebecca, , ,							
Mailing Address PO Box 632			10 31 2016					
City	State	Zip Code	Transaction ID : SA11AI.7962					
Cle Elum	WA	98922-0632	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		250.00					
Name of Employer (for Individual) Retired		pation (for Individual) puntant	Memo Item					
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate `	Year-to-Date ▼ 250.00						
Full Name of Individual (Last, First, Middle Chellis, Maria Elena, , , Mailing Address 8354 Luce Court	Initial) or Full Or	ganization Name	Date of Receipt					
	1		11 05 2016					
City	State	Zip Code 22153-3318	Transaction ID : SA11AI.9016					
Springfield	VA	Amount of Each Receipt this Period						
FEC ID number of contributing federal political committee.	С		168.00					
Name of Employer (for Individual) St John Paul HS	Occu Adm	pation (for Individual) iin	Memo Item					
Receipt For: 2016	Aggregate `	Year-to-Date ▼						
Primary General Other (specify) ▼		, 168.00						
Full Name of Individual (Last, First, Middle C. Chellis, Maria Elena, , ,	Initial) or Full Or	ganization Name	Date of Receipt					
Mailing Address 8354 Luce Court			11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City	State VA	Zip Code 22153-3318	Transaction ID : SA11AI.9017					
Springfield		22100-3310	Amount of Each Receipt this Period					
FEC ID number of contributing federal political committee.	С		179.00					
Name of Employer (for Individual)	Occu	pation (for Individual)	Memo Item					
St John Paul HS	Admi	n	_					
Receipt For: 2016 Primary	Aggregate `	Year-to-Date ▼	.					
Other (specify)		347.00						
SUBTOTAL of Receipts This Page (optional))		597.00					
TOTAL This Period (last page this line numb	per only)							

F	FOR LINE NUMBER:							9	OF		78
(c	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16	6		17

	d Statements may not be sold or used by any per the name and address of any political committee					
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC						
Full Name of Individual (Last, First, Middle Chellis, Maria Elena, , , Mailing Address 8354 Luce Court	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 8554 Lace Court		11 05 2016				
City	State Zip Code	Transaction ID : SA11AI.9018				
Springfield	VA 22153-3318	_ Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	198.00				
Name of Employer (for Individual) St John Paul HS	Occupation (for Individual) Admin	Memo Item				
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 545.00					
Full Name of Individual (Last, First, Middle Connolly, Kimberly, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 4003 Briarwood Avenue	10 30 2016					
City	State Zip Code	Transaction ID : SA11AI.7863				
Wausau	WI 54403-2212	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer (for Individual) Info Requested	Occupation (for Individual) Info Requested	Memo Item				
Receipt For: 2016	Aggregate Year-to-Date ▼					
Primary ★ General Other (specify) ▼	250.00					
Full Name of Individual (Last, First, Middle Dahl, Kristian, , ,	e Initial) or Full Organization Name	Date of Receipt				
Mailing Address 5004 Harvest Glen Court		11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Glen Allen	State Zip Code VA 23059-2539	Transaction ID : SA11AI.8116				
	23035-2338	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer (for Individual) McGuireWoods LLP	Occupation (for Individual) Attorney	Memo Item				
Receipt For: 2016	Aggregate Year-to-Date ▼	_				
Primary X General Other (specify)	250.00					
SUBTOTAL of Receipts This Page (optional)	698.00				
TOTAL This Period (last page this line numl	per only)					

						PAGE	 10	OF	78
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12		
		13		14		15	16	;	17

or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee t	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle In Davis, Terry, , , Mailing Address 1308 Rhode Island Ave NW	nitial) or Full Organization Name	Date of Receipt
City Washington	State Zip Code DC 20005	Transaction ID : SA11AI.7127 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer (for Individual)	Occupation (for Individual)	250.00 Memo Item
ForthRight Strategy Receipt For: 2016 Primary X General Other (specify)	Production Manager Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle In Ducey, James, , , Mailing Address 34 E Lawn Drive	State Zip Code	Date of Receipt 10 31 2016
City Holmdel FEC ID number of contributing federal political committee.	Transaction ID : SA11Al.7964 Amount of Each Receipt this Period 250.00	
Name of Employer (for Individual) BNY Mellon Receipt For: 2016 Primary ★ General Other (specify) ▼	Occupation (for Individual) Banking Aggregate Year-to-Date ▼ 250.00	Memo Item
Full Name of Individual (Last, First, Middle In Ducey, James, , , Mailing Address 34 E Lawn Drive	itial) or Full Organization Name	Date of Receipt 11 02 2016
City Holmdel FEC ID number of contributing federal political committee.	State Zip Code 07733-2402	Transaction ID : SA11AI.8346 Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) BNY Mellon Receipt For: 2016 Primary General Other (specify)	Occupation (for Individual) Banking Aggregate Year-to-Date ▼ 500.00	Memo Item
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number	only)	

						PAGE	 11	OF	78
(cl	he	ck only	or	ne)					
	×	11a		11b		11c	12		
		13		14		15	16	;	17

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle I Ducey, James, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 34 E Lawn Drive		11 03 2016
City Holmdel	State Zip Code NJ 07733-2402	Transaction ID : SA11AI.8729
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) BNY Mellon	Occupation (for Individual) Banking	Memo Item
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
Full Name of Individual (Last, First, Middle I Evans, Marilyn, , , Mailing Address 263 South Beach Road	nitial) or Full Organization Name	Date of Receipt
City Hobe Sound	10 28 2016 Transaction ID : SA11Al.7651 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Self-Evans Financial Svc Ltd	Occupation (for Individual) Investor	Memo Item
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle I Freeborn, Joann, Lee, ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 1904 North 240th Road		10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Concordia	State Zip Code KS 66901-6825	Transaction ID : SA11AI.7966 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual)	Occupation (for Individual) retired	Memo Item
Receipt For: 2016 Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	>	750.00
TOTAL This Period (last page this line numbe	r only)	

TOTT EITHE THOMBETT.						PAGE	•	12	OF	78
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

	Statements may not be sold or used by any persee name and address of any political committee t	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle Ir Friess, Foster, , , Mailing Address P.O. Box 9790 City Jackson	State Zip Code WY 83002-9790	Date of Receipt 11
FEC ID number of contributing federal political committee. Name of Employer (for Individual) Friess Family Foundation Receipt For: 2016 Primary X General Other (specify) V	C Occupation (for Individual) Founder and Chairman Aggregate Year-to-Date ▼ 25000.00	25000.00 Memo Item
Full Name of Individual (Last, First, Middle In Goodliffe, Lenora, , , Mailing Address 3273 Rosewood Lane` City Escondido FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: 2016 Primary General Other (specify)	State Zip Code CA 92027-6754 C Occupation (for Individual) Retired Aggregate Year-to-Date 250.00	Date of Receipt 10 30 2016 Transaction ID : SA11Al.7859 Amount of Each Receipt this Period 250.00 Memo Item
Full Name of Individual (Last, First, Middle Ir Green, William, , , Mailing Address 2408 Skyline Pointe City Jonesboro FEC ID number of contributing federal political committee. Name of Employer (for Individual) retired Receipt For: 2016 Primary General Other (specify)	State Zip Code AR 72404 C Occupation (for Individual) radiologist Aggregate Year-to-Date 250.00	Date of Receipt 10 31 2016 Transaction ID: SA11AI.7968 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		25500.00
TOTAL This Period (last page this line number	only)	7 7 7 7

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

78

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Gunn, Cindy, , , Date of Receipt Mailing Address 364 Bloomsbury Cir 2016 City Zip Code State Transaction ID: SA11AI.8904 SC Camden 29020 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Homemaker Homemaker Receipt For: 2016 Aggregate Year-to-Date ▼ Primary ✗ General 500.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Henkel, Raymond, , , Date of Receipt Mailing Address 4092 South Wabash Street 10 2016 City State Zip Code Transaction ID: SA11AI.7098 CO Denver 80237-1755 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: 2016 Aggregate Year-to-Date ▼ **✗** General Primary Other (specify) ▼ 100.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Henkel, Raymond, , , Date of Receipt Mailing Address 4092 South Wabash Street 10 30 2016 City Zip Code State Transaction ID: SA11AI.7851 CO Denver 80237-1755 Amount of Each Receipt this Period FEC ID number of contributing C 75.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: 2016 Aggregate Year-to-Date ▼ Primary **✗** General 175.00 Other (specify) 675.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

78

14 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Henkel, Raymond, , , Date of Receipt Mailing Address 4092 South Wabash Street 2016 City Zip Code State Transaction ID: SA11AI.9150 CO Denver 80237-1755 Amount of Each Receipt this Period FEC ID number of contributing C 50.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: 2016 Aggregate Year-to-Date ▼ Primary ✗ General 225.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Henry, Beverly, , , Date of Receipt Mailing Address 1121 Guadalupe Court 2016 City State Zip Code Transaction ID: SA11AI.8893 TX Colleyville 76034-5885 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed Small Business Owner Receipt For: 2016 Aggregate Year-to-Date ▼ **✗** General Primary Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Henry, Beverly, , , Date of Receipt Mailing Address 1121 Guadalupe Court 04 2016 City State Zip Code Transaction ID: SA11AI.8894 TX Colleyville 76034-5885 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self-Employed Small Business Owner Receipt For: 2016 Aggregate Year-to-Date ▼ Primary **✗** General 500.00 Other (specify) 550.00 SUBTOTAL of Receipts This Page (optional).....

F	TOTT EITHE TOWNDETT.						•	15	OF	78
(0	che	ck only	or	ne)						
	X	11a		11b		11c		12		
		13		14		15		16	;	17

Any information copied from such Reports and or for commercial purposes, other than using the such as			erson for the purpose of soliciting contributions e to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			
Full Name of Individual (Last, First, Middle Hofshi, David, , , Mailing Address 142 Clyde Townsend Road	Apt. 17		Date of Receipt 11 04 2016
City Boone	State NC	Zip Code 28607-8655	Transaction ID : SA11AI.8900
FEC ID number of contributing federal political committee.	C		Amount of Each Receipt this Period 385.00
Name of Employer (for Individual) Self-Employed	Constru	ation (for Individual)	Memo Item
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Yea		
Full Name of Individual (Last, First, Middle Korpan, Richard, , , Mailing Address 31483 Morning Star Drive	Date of Receipt 10 27 2016		
City	State	Zip Code	Transaction ID : SA11AI.7506
Evergreen	СО	80439-7969	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	500.00		
Name of Employer (for Individual) Retired	Occupa Retired	ation (for Individual)	Memo Item
Receipt For: 2016 Primary General Other (specify) ▼			
Full Name of Individual (Last, First, Middle Korte, Gregg, , ,	Initial) or Full Orga	nization Name	Date of Receipt
Mailing Address 8479 Greenbriar Estate			10 31 2016
City Edwardsville	State IL	Zip Code 62025-6947	Transaction ID : SA11AI.7960
FEC ID number of contributing federal political committee.	С	02020 0011	Amount of Each Receipt this Period
Name of Employer (for Individual) NOYB Inc	Manage		Memo Item
Receipt For: 2016 Primary X General Other (specify)	Aggregate Yea	ar-to-Date ▼ 225.00	
SUBTOTAL of Receipts This Page (optional).			1085.00
TOTAL This Period (last page this line number	er only)		

FOR LINE NUMBER: PAGE 16 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

78

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Kranzlin, Mary, E., , Date of Receipt Mailing Address 809 Oenoke Ridge 2016 City Zip Code State Transaction ID: SA11AI.7653 CT New Canaan 06840-3128 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Homemaker Homemaker Receipt For: 2016 Aggregate Year-to-Date ▼ Primary ✗ General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Kurtz, Freda, , , Date of Receipt Mailing Address P.O. Box 19434 10 2016 City State Zip Code Transaction ID: SA11AI.7223 NV Reno 89511-1921 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) CIS Technology Inc. Admin Receipt For: 2016 Aggregate Year-to-Date ▼ **∡** General Primary Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** LeBlanc, Anne, , , Date of Receipt Mailing Address 2759 Ridgeway Avenue 10 24 2016 City Zip Code State Transaction ID: SA11AI.7307 NY Rochester 14626-4210 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: 2016 Aggregate Year-to-Date ▼ Primary **✗** General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 7 - - -

-		LINE	PAGE	1	17	OF	78			
(0	che	ck only	or	ıe)						
	X	11a		11b		11c		12		
		13		14		15		16		17

		ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle Marotti, Keith, , , Mailing Address 10821 Duval Circle	Initial) or Full Organization Name	Date of Receipt
O't.	75.0.4	10 24 2016
City Kalamazoo	State Zip Code MI 49009-6263	Transaction ID : SA11AI.7305
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Mohun, Maximilian, , , Mailing Address 503 W Linden St	Date of Receipt 11 04 2016	
City	State Zip Code	Transaction ID : SA11AI.8898
Caldwell	ID 83605	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) eWingz Systems Inc	Occupation (for Individual) CEO	Memo Item
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle Mora, Alberto, , ,	Initial) or Full Organization Name	Date of Receipt
Mailing Address 33 Fair Street		11 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Cold Spring	State Zip Code NY 10516-3005	Transaction ID : SA11AI.8896
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 250.00
Name of Employer (for Individual) Vidaris	Occupation (for Individual) Architect	Memo Item
Receipt For: 2016 Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line numb	er only)	

FOF	I LINE	NOWREK	:	PAGE	• '	18 O	⊢	10
(che	ck only	one)						
×	11a	11b		11c		12		
	13	14		15		16		17

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle In Myers, Ian, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 3104 Quail Lane		11 01 2016
City Arlington	State Zip Code TX 76016-2113	Transaction ID : SA11AI.8118 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer (for Individual) Safe Money Resource Inc. Receipt For: 2016	Occupation (for Individual) Communications Coordinator	Memo Item
Primary X General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name of Individual (Last, First, Middle In Nohrden, Marlana, , , Mailing Address 5 Las Brisas Drive West Lake	Date of Receipt	
City West Lake Hills	State Zip Code TX 78746	Transaction ID : SA11AI.7657 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Homemaker	Occupation (for Individual) Homemaker	Memo Item
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name of Individual (Last, First, Middle In Nohrden, Marlana, , ,	nitial) or Full Organization Name	Date of Receipt
Mailing Address 5 Las Brisas Drive West Lak		11 02 / Y = Y = Y = Y
City West Lake Hills	State Zip Code TX 78746	Transaction ID : SA11AI.8347 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer (for Individual) Homemaker	Occupation (for Individual) Homemaker	Memo Item
Receipt For: 2016 Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	>	900.00
TOTAL This Period (last page this line number	r only).	

F	OR	LINE	NU	MBER	:	PAGE	: ′	19	OF		78
(0	(check only one)										
	X	11a		11b		11c		12			
		13		14		15		16			17

	Statements may not be sold or used by any per he name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle In Nolan, Sheila, , , Mailing Address 6411 Faustino Way City Sacramento FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: 2016 Primary General Other (specify)	Date of Receipt 10 20 2016 Transaction ID: SA11AI.7114 Amount of Each Receipt this Period 100.00 Memo Item	
Full Name of Individual (Last, First, Middle In Nolan, Sheila, , , Mailing Address 6411 Faustino Way City Sacramento FEC ID number of contributing federal political committee.	Date of Receipt 10 20 2016 Transaction ID: SA11AI.7115 Amount of Each Receipt this Period	
Name of Employer (for Individual) Retired Receipt For: 2016 Primary General Other (specify) ▼	Memo Item	
Full Name of Individual (Last, First, Middle In Nolan, Sheila, , , Mailing Address 6411 Faustino Way City Sacramento FEC ID number of contributing federal political committee. Name of Employer (for Individual) Retired Receipt For: 2016 Primary General Other (specify)	Initial) or Full Organization Name State Zip Code 95831-1076 C Occupation (for Individual) Attorney Aggregate Year-to-Date ▼	Date of Receipt 10 28 2016 Transaction ID: SA11AI.7641 Amount of Each Receipt this Period 100.00 Memo Item
SUBTOTAL of Receipts This Page (optional)	>	300.00
TOTAL This Period (last page this line number	er only)	

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBE (check only one)

FOH	LINE	NU	MBER	:	PAGE	- 2	20 OF		78
(check only one)									
×	11a		11b		11c		12		
	13		14		15		16		17

	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC			
Α.	Full Name of Individual (Last, First, Middle Inition OConnell, Michelle, , , Mailing Address 8908 Iverleigh Court	al) or Full Orga	anization Name	Date of Receipt
	City	State	Zip Code	10 25 2016 Transaction ID : SA11Al.7366
	Potomac	MD	20854-4469	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	250.00		
	Name of Employer (for Individual) Self-Employed		ation (for Individual) Health Consultant	Memo Item
	Receipt For: 2016 Primary General Other (specify) ▼			
В.	Full Name of Individual (Last, First, Middle Initi OConnell, Michelle, , ,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 8908 Iverleigh Court City	State	Zip Code	11 01 2016
	Potomac	MD	20854-4469	Transaction ID : SA11AI.8110 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		100.00
	Name of Employer (for Individual) Self-Employed	1 .	ation (for Individual) Health Consultant	Memo Item
	Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 350.00	
С .	Full Name of Individual (Last, First, Middle Initi ODonnell, Kathleen, , ,	al) or Full Orga	anization Name	Date of Receipt
	Mailing Address 2165 Gulf of Mexico Drive Apt.	ı		10 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Longboat Key	State FL	Zip Code 34228-5201	Transaction ID : SA11AI.7861 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer (for Individual) RETIRED	Occupa Retired	ation (for Individual)	Memo Item
	Receipt For: 2016 Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 250.00	
s	SUBTOTAL of Receipts This Page (optional)			600.00
٦ ا	OTAL This Period (last page this line number of	nlv)		

F	OR	LINE	PAGE	2	21	OF		78			
(0	(check only one)										
	X	11a	11c		12						
		13		14		15		16			17

Any information copied from such Reports and or for commercial purposes, other than using the							
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC							
Full Name of Individual (Last, First, Middle I Orscheln, Robert, J., , Mailing Address P.O. Box 280			Date of Receipt 11 04 2016				
City Moberly	State MO	Zip Code 65270	Transaction ID : SA11AI.8906 Amount of Each Receipt this Period				
federal political committee.	FEC ID number of contributing federal political committee.						
Name of Employer (for Individual) ORSCHELN PRODUCTS LLC Receipt For: 2016	int Fam. 2012						
Primary ★ General Other (specify) ▼	Primary						
Full Name of Individual (Last, First, Middle I Perry, William, , , Mailing Address 411 Main Street Floor 2	nitial) or Full Orga	nization Name	Date of Receipt				
City East Aurora	State NY	Zip Code 14052-1700	Transaction ID : SA11AI.7129 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	ů l						
Name of Employer (for Individual) Self-employed Receipt For: 2016	Public	ation (for Individual) relations	Memo Item				
Primary General Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 250.00					
Full Name of Individual (Last, First, Middle I Pfeiffer, Maureen, , ,	nitial) or Full Orga	nization Name	Date of Receipt				
Mailing Address 9356 Brehm Rd City	State	Zip Code	10 22 2016 Transaction ID : SA11Al.7219				
Cincinnati	ОН	45252-2608	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		100.00				
Name of Employer (for Individual) Retired	Occupa Retired	tion (for Individual)	Memo Item				
Receipt For: 2016 Primary Seneral Other (specify)	Aggregate Yea	ar-to-Date ▼ 100.00					
SUBTOTAL of Receipts This Page (optional)		•	10350.00				
TOTAL This Period (last page this line number	r only)	>					

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 22 OF Use separate schedule(s) (check only one) **X** 11a 11b 12 11c

78

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Pfeiffer, Maureen, , , Date of Receipt Mailing Address 9356 Brehm Rd 2016 City Zip Code State Transaction ID: SA11AI.7620 OH Cincinnati 45252-2608 Amount of Each Receipt this Period FEC ID number of contributing C 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: 2016 Aggregate Year-to-Date ▼ Primary ✗ General 200.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pfeiffer, Maureen, , , Date of Receipt Mailing Address 9356 Brehm Rd 2016 City State Zip Code Transaction ID: SA11AI.8320 OH Cincinnati 45252-2608 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: 2016 Aggregate Year-to-Date ▼ **✗** General Primary Other (specify) ▼ 300.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Rupert, Mary, P., , Date of Receipt Mailing Address 717 Manatawna Avenue 10 2016 City State Zip Code Transaction ID: SA11AI.7500 PΑ Philadelphia 19128-1020 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Receipt For: 2016 Aggregate Year-to-Date ▼ Primary **✗** General 250.00 Other (specify) 450.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 23 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

78

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Salcedo, Judith, , , Date of Receipt Mailing Address 14301 Bidwell Avenue 2016 City Zip Code State Transaction ID: SA11AI.7819 OH Cleveland 44111-1454 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Teacher Receipt For: 2016 Aggregate Year-to-Date ▼ Primary ✗ General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Smith, Lancia, , , Date of Receipt Mailing Address 1061 East 133rd Way 10 2016 City State Zip Code Transaction ID: SA11AI.7655 CO **Thornton** 80241-1122 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Smith Environmental and Engineering **Executive Management / Writing** Receipt For: 2016 Aggregate Year-to-Date ▼ **✗** General Primary Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Szczepaniak, James, , , Date of Receipt Mailing Address 192 W. Third Ave. 07 2016 City Zip Code State Transaction ID: SA11AI.9168 PΑ Trappe 19426 Amount of Each Receipt this Period FEC ID number of contributing C 257.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Info Requested Info Requested Receipt For: 2016 Aggregate Year-to-Date ▼ Primary **✗** General 257.00 Other (specify) 757.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 24 OF 78 Use for e Deta

							FAGL	. 4	24 01		70
separate schedule(s)	(ch	(check only one)									
each category of the	\ _		,								
٠,		X	11a		11b		11c		12		
illed Summary Page	H	-				-	_				
			13		14		15		16		17
		_		_				_			

	d Statements may not be sold or used by any p the name and address of any political committee					
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC						
Full Name of Individual (Last, First, Middle Taylor, Steve, , , Mailing Address 515 Santa Paula Drive	Initial) or Full Organization Name	Date of Receipt				
		11 01 2016				
City	State Zip Code CA 93901-1517	Transaction ID : SA11AI.8127				
Salinas	CA 93901-1517	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	10000.00					
Name of Employer (for Individual) VERITAS V	Memo Item					
Receipt For: 2016 Primary General Other (specify) ▼						
Full Name of Individual (Last, First, Middle Taylor, Wayne, , , Mailing Address PO Box 359	Initial) or Full Organization Name	Date of Receipt				
Mailing Address PO Box 358		10 27 2016				
City						
Oak Grove						
FEC ID number of contributing federal political committee.	C	300.00				
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Memo Item				
Receipt For: 2016 Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00					
Full Name of Individual (Last, First, Middle C. Unanue, Thomas, , ,	Initial) or Full Organization Name	Date of Receipt				
Mailing Address 601 Reinante Ave		10 27 2016				
City Coral Gables	State	Transaction ID : SA11AI.7498				
-		Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer (for Individual) Unemployed	Occupation (for Individual) Purchasing executive	Memo Item				
Receipt For: 2016	Aggregate Year-to-Date ▼					
Primary X General Other (specify)	250.00					
SUBTOTAL of Receipts This Page (optional))	10550.00				
TOTAL This Period (last page this line numb	per only)					

FOR LINE NUMBER: PAGE 25 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c

78

for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Vidimos, David, , , Date of Receipt Mailing Address 3100 Rustic Woods Court 2016 31 City Zip Code State Transaction ID: SA11AI.7970 TX Bedford 76021-4064 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) American Airlines Airline Pilot Receipt For: 2016 Aggregate Year-to-Date ▼ Primary ✗ General 250.00 Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. von Clef, Julius, , , Date of Receipt Mailing Address PO Box 32189 10 2016 City State Zip Code Transaction ID: SA11AI.7972 TX Knoxville 37930 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Summit Medical Group Physician Receipt For: 2016 Aggregate Year-to-Date ▼ **✗** General Primary Other (specify) ▼ 250.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wierda, Craig, , , Date of Receipt Mailing Address 235 central avenue 01 2016 City State Zip Code Transaction ID: SA11AI.8125 MI Holland 49423 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **Eagle Companies** Manager Receipt For: 2016 Aggregate Year-to-Date ▼ Primary **✗** General 1000.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER:						PAGE	2	26	OF		78
(check only one)											
	X	11a		11b		11c		12			
		13		14		15		16			17

	Statements may not be sold or used by any per ne name and address of any political committee	
NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC		
Full Name of Individual (Last, First, Middle II Williams, Judith, , , Mailing Address 4333 Blackthorne Court City Virginia Beach FEC ID number of contributing federal political committee. Name of Employer (for Individual) Childrens Specialty Group Receipt For: 2016 Primary General Other (specify) Other (specify)	Date of Receipt 11 01 2016 Transaction ID: SA11AI.8120 Amount of Each Receipt this Period 500.00 Memo Item	
Full Name of Individual (Last, First, Middle In Young, Thomas, , , Mailing Address P.O. Box 1210 City Sylvania FEC ID number of contributing federal political committee. Name of Employer (for Individual) Self-employed Receipt For: 2016 Primary General	State Zip Code OH 43560-5210 C Occupation (for Individual) Business consultant/investor Aggregate Year-to-Date ▼	Date of Receipt 10 28 2016 Transaction ID : SA11AI.7659 Amount of Each Receipt this Period 400.00 Memo Item
Other (specify) ▼ Full Name of Individual (Last, First, Middle II Zeidler, Daniel, , , Mailing Address 2416 North 74th Street City Wauwatosa FEC ID number of contributing federal political committee. Name of Employer (for Individual) Family Life Council Inc. Receipt For: 2016 Primary General Other (specify)	Adou.00 State Zip Code S3213-1238 Occupation (for Individual) Administrator Aggregate Year-to-Date ▼	Date of Receipt 10 27 2016 Transaction ID: SA11AI.7502 Amount of Each Receipt this Period 250.00 Memo Item
SUBTOTAL of Receipts This Page (optional)		1150.00
TOTAL This Period (last page this line numbe	r only)	62662.00

SCHEDULE B (FEC Form 3X)	llee	water ask - style ()	FOR LINE	E NUMBER: PAGE 27 OF 78				
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check onl		¬ oc			
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b		
Any information copied from such Departs and Chater	onte mou :	not he cold or us						
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam								
NAME OF COMMITTEE (In Full)								
WOMEN SPEAK OUT PAC								
Full Name (Last, First, Middle Initial)				Data of D	: -	-1		
A. All Seasons Strategies, LLC				Date of Disbursement				
Mailing Address P.O. Box 3521				11 04 2016				
City	State	Zip Code		FEC Ident	tification Nu	ımher		
opena	WA	99202			incation 14	anibol		
Purpose of Disbursement Director Payroll				C				
Candidate Name						SB21B.9214		
			Category/ Type	Amount of	Each Disi	oursement this Period		
Office Sought: House Disbursen	nent For:			1	4 5 - 1	6000.00		
	Primary	General			7	,		
	Other (spec	cify) 🔻		Memo	Item			
State: District:				_				
Full Name (Last, First, Middle Initial) B. All Seasons Strategies II C				Date of D	isbursemer	nt		
B. All Seasons Strategies, LLC				M M	/ D D	/ Y Y Y Y		
Mailing Address P.O. Box 3521		11	22	2016				
City	State	Zip Code		FFC Ident	tification Nu	ımber		
Sp 5. mail 10	WA	99202			anound it			
Purpose of Disbursement Expense Reimbursement	Category/ Type			C				
Candidate Name				Transaction ID: SB21B.6924 Amount of Each Disbursement this Period				
Office Sought: House Disbursen	nent For:		71	1313.89				
	Primary	General			7	7-1-4-1-1		
	Other (spec	cify)		Memo Item				
State: District:								
Full Name (Last, First, Middle Initial)				Date of D	isbursemer	nt		
C. Ashley, Michelle, , ,				M M	/ D D	, , , , , , , , , , , , , , , , , , ,		
Mailing Address 1200 New Hampshire Ave NW Ste	750			11	15	2016		
City	State	Zip Code		FFC Ident	tification Nu	ımber		
Washington	DC	20036		l ——				
Purpose of Disbursement Expense Reimbursement								
Candidate Name			Category/			SB21B.6918 Sursement this Period		
Office Sought: House Disbursen	nent For:		Type			1963.07		
	Primary	General			7	4		
President	Other (spec			Memo	ltem			
State: District:				L wieind				
SUBTOTAL of Disbursements This Page (optional)			·····•		7	9276.96		
TOTAL This Davied (feet many this line mounts to								
TOTAL This Period (last page this line number only)					4 4 4			

S П

SCHEDULE B (FEC Form 3X)			FOR LIN	INE NUMBER: PAGE 28 OF					78		
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check or		one) 22 23 26 27						
		Summary Page	211		280	, -	29	30b			
Any information copied from such Reports and Stater	nonte may n	not be sold or use									
or for commercial purposes, other than using the nan											
NAME OF COMMITTEE (In Full)											
Full Name (Last, First, Middle Initial)											
A. Ashley, Michelle, , ,				Date	of Disbur	semer	nt				
				11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
Mailing Address 1200 New Hampshire Ave NW Ste	750										
City	State	Zip Code									
Washington	DC	20036		FEC I	dentificat	on Nu	umber				
Purpose of Disbursement Expense Reimbursement				C							
Candidate Name					ansactio		-				
Candidate Name			Category/ Type	Amoui	nt of Eac	h Dist	ourseme	ent this Pe	Period		
Office Sought: House Disburser	ment For:		71	11:				99.95			
Senate	Primary	General			,		,				
State: District:	Other (spec	cify) 🔻		M	emo Iten	ı					
Full Name (Last, First, Middle Initial)				+							
B. Ashley, Michelle, , ,				Date of	of Disbur	semer	nt				
				M = M / D = D / Y = Y = Y							
Mailing Address 1200 New Hampshire Ave NW Ste	e 750			11		15		2016			
City	State	Zip Code									
Washington	DC	20036		FEC Identification Number							
Purpose of Disbursement		С	C								
Expense Reimbursement Candidate Name			ansactio								
Candidate Name			Category/ Type	Amoui	ent this Pe	∍riod					
Office Sought: House Disburser	ment For:		1,700	498.87							
Senate	Primary	4 4 4									
President	Other (spec	eify)		М	emo Iten	ı					
State: District: Full Name (Last, First, Middle Initial)				+-							
C. Authorize.net				Date of	of Disbur	semer	nt				
- Tatriorization				M I N	/ D	■ D	/ Y	YYYY			
Mailing Address P.O. Box 947				11		02	L	2016	_		
City	State	Zip Code		+							
American Fork	UT	84003-0947		FEC I	dentificat	on Nu	umber				
Purpose of Disbursement Credit Card Processing fees											
Candidate Name		ansactio									
Candidate Name			Category/ Type	Amoui	nt of Eac	h Dist	ourseme	ent this Pe	∍riod		
Office Sought: House Disburser	ment For:		.,,,,,	[- ·	788.07			
Senate	Primary										
President District:	Other (spec	eify) 🔻		Memo Item							
State: District:											
SUBTOTAL of Disbursements This Page (optional)								1386.89)		
- age (opnotial)				-	-	=	7	1 4	#		
TOTAL This Period (last page this line number only)			·····•								

S 17

SCHEDULE B (FEC Form 3X)			FOR LINE	NE NUMBER: PAGE 29 OF							
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check on	·	one) 22 23 26 27						
	Detailed	Summary Page	288		28c	29	30b				
Any information copied from such Reports and State	ements mav	not be sold or use	ed by any per	son for the r	ourpose c	of solicitina co	 ontributions				
or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
Full Name (Last, First, Middle Initial)											
A. Authorize.net				Date of	Disburse	ment					
Mailing Address D.O. Poy 047				M M M	/ D		7 Y Y Y				
Mailing Address P.O. Box 947				FEC Identification Number							
City	State	Zip Code									
American Fork	UT	84003-0947					_				
Purpose of Disbursement Credit Card Processing fees				C							
Candidate Name			Category/	1		ID: SB21B.6 Disbursemen					
			Type	Amount	OI Lacii	Disbursemen	t tills i ellod				
	ement For:				93.70						
Senate President	Primary	General									
State: District:	Other (sp	echy) 🔻		Mer	no Item						
Full Name (Last, First, Middle Initial)											
B. Authorize.net				Date of	Disburse	ment					
				M = M	/ D		Y				
Mailing Address P.O. Box 947				11	0:	3 2	2016				
City	State	Zip Code		FEC Identification Number							
American Fork Purpose of Disbursement	UT	84003-0947									
Credit Card Processing fees				C							
Candidate Name			Category/			ID : SB21B.6 Disbursemen					
			Type								
	ement For:	0	1.18								
Senate President	Primary Other (spe	General									
State: District:	J Gillor (op	,		Mer	no Item						
Full Name (Last, First, Middle Initial)											
C. Authorize.net				Date of	Disburse	ment					
Mailing Address P.O. Box 947					03		2016				
City	State	Zip Code		FEC Ide	ntification	Number					
American Fork Purpose of Disbursement	UT	84003-0947		С							
Credit Card Processing fees							8891				
Candidate Name	Category/	Transaction ID: SB21B.6891 Amount of Each Disbursement this Period									
Office Sought: House Disburs	ement For:		Туре	-			75.64				
Senate Dispurse	Primary	General		/5.64							
President	Other (sp			Memo Item							
State: District:				luier	no itelli						
							170.52				
SUBTOTAL of Disbursements This Page (optional)			·····•		7	7	170.52				
TOTAL This Period (last page this line number only	v)										

S 17

SCHEDULE B (FEC Form 3X)			FOR L	NE NUMBER: PAGE 30 OF					F 78			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	I `	only on	one) 22 23 26 27							
	Detailed	Summary Page		28a	28b	28c	29	30b				
Any information copied from such Reports and State	nents may	not be sold or use	ed by any	nerson f			of solicitin	a contributio	ons			
or for commercial purposes, other than using the nar												
NAME OF COMMITTEE (In Full)												
│ WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)												
A. Authorize.net				[Date of	Disburse	ement					
				_	M = M	/ D		0040				
Mailing Address P.O. Box 947					11	C	3	2016	_			
City	State	Zip Code		F	FEC Identification Number							
American Fork	UT	84003-0947			_							
Purpose of Disbursement Credit Card Processing fees				7 [C							
Candidate Name	Namo							IB.6892				
			Category Type	" "	Amount	of Each	Disburser	ment this Pe	erioa			
Office Sought: House Disburse	ment For:					40. 1	1 70	214.10				
Senate	Primary	General										
State: District:	Other (spe	ecify) $lacktriangleright$			Mer	no Item						
Full Name (Last, First, Middle Initial)												
B. Baker, Naomi, , ,				1	Date of	Disburse	ement					
					M = M	/ D	D / Y	- Y - Y - Y				
Mailing Address 1200 New Hampshire Ave NW Suiye 750					11	2016						
,	State DC	Zip Code		F	FEC Identification Number							
Washington Purpose of Disbursement	DC	20036	_ [Transaction ID : SB21B.9211								
Field Director expenses												
Candidate Name			Category	, A			_	ment this Pe	eriod			
Office Country House		Type				439.20						
Office Sought: House Disburse Senate	ment For: Primary	General		l L								
President	Other (spe											
State: District:				L	Mei	no Item						
Full Name (Last, First, Middle Initial)												
C. Blevio, Chrissy, , ,				'		Disburse						
Mailing Address 1200 New Hampshire Ave NW Ste	· 750				м = м 11	/ D	0 / Y	2016				
	State DC	Zip Code		F	FEC Ide	entificatio	n Number					
Washington Purpose of Disbursement		20036		_ [С							
·						nsaction	ID · SR2	1R 6895				
Candidate Name	Category					Transaction ID: SB21B.6895 Amount of Each Disbursement this Period						
Office Country House			Type					90.04				
Office Sought: House Disburse Senate	ment For: Primary	General	l L	80.04								
President	Other (spe			П., .								
State: District:	(-	· ·			Mei	mo Item						
									一			
SUBTOTAL of Disbursements This Page (optional)				•		-		733.34	1			
TOTAL This Period (last page this line number only)			_					$\neg \neg$			

	CHEDULE B (FEC Form 3X)	Hea san						31 OF	78		
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only		one) 22 23 26 27					
			Summary Page	X 21b 28a	22 28b	23 28c	26	30b			
Δr	ny information copied from such Reports and Staten	nents may n	not be sold or use						าร		
	for commercial purposes, other than using the name										
	NAME OF COMMITTEE (In Full)										
	WOMEN SPEAK OUT PAC										
^	Full Name (Last, First, Middle Initial)				Doto of D	isbursemer	n+				
A.	Blevio, Chrissy, , ,				M M	DDD		Y Y Y			
	Mailing Address 1200 New Hampshire Ave NW Ste	750			11	15		2016			
	,	State	Zip Code		FEC Identification Number						
	Washington Purpose of Disbursement	DC	20036					-			
	Expense Reimbursement				C		ODO45	2007			
	Candidate Name			Category/			: SB21B.6897 sbursement this Period				
	0.5			Туре					\neg		
	Office Sought: House Disburser Senate	nent For: Primary	General			7		150.97			
	President	Other (spec			П.,	la a re-					
	State: District:	. (- - 30			Memo	item					
	Full Name (Last, First, Middle Initial)										
В.	Campaign HQ				Date of D	isbursemer	nt				
	Mailing Address 109 West Front St				10	22		2016	1		
	Maning Address 109 West Florit St				10	22		-010	1		
	,	State Zip Code			FEC Identification Number						
	Brooklyn Purpose of Disbursement	IN	52211								
	Conference Call				Transaction ID : SB21B.9218						
	Candidate Name			Category/	Amount of	-		riod			
	0.5			Туре							
	Office Sought: House Disbursen Senate	nent For: Primary	General			7	7	500.00			
		Other (spec			п., .,						
_	State: District:				Memo	Item					
_	Full Name (Last, First, Middle Initial)										
C.	Chain Bridge Bank					isbursemer					
	Mailing Address 1445 McLaughlin Ave				10	25		2016			
									4		
	,	State	Zip Code		FEC Ident	ification Nu	umber				
	McLean Purpose of Disbursement	VA	22101		С						
	Bank fees					action ID :	SR21R 4	3888			
	Candidate Name			Category/		Each Dist			riod		
	Office Sought: House Bishman	nont For		Type				79.00	П		
	Office Sought: House Disburser Senate	nent For: Primary	General			7	7	13.00			
	President	Other (spec			Morra	Itom					
	State: District:				Memo	item					
Г									$\overline{}$		
s	UBTOTAL of Disbursements This Page (optional)		······	······				729.97			
Ţ	OTAL This Period (last page this line number only)										
	choc (act page this line hamber only)						4	100			

SCHEDULE B (FEC Form 3X)	lles		FOR LINE	OR LINE NUMBER: PAGE 32						
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only	· — · —	¬					
	Detailed	Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b				
Any information copied from such Departs and Chater	onto mari	not be cold or								
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)				D-/ 15						
A. Chain Bridge Bank					isburseme					
Mailing Address 1445 McLaughlin Ave				10	25	2016				
City	State	Zip Code		FEC Ident	tification N	umher				
McLean	VA	22101			oadon N	4.11501				
Purpose of Disbursement Wire transfer fee				C						
Candidate Name			Cotanaiii			: SB21B.6925				
			Category/ Type	Amount o	of Each Disbursement this Period					
Office Sought: House Disbursen	nent For:		· · · · · · · · · · · · · · · · · · ·		70. 1	220.00				
Senate	Primary	General			7					
President	Other (spec	cify) 🔻		Memo	Item					
State: District:				_						
Full Name (Last, First, Middle Initial) B. Chain Bridge Bank				Date of D	isburseme	nt				
B. Chain Bridge Bank				M M	/ D D	/ Y Y Y Y Y				
Mailing Address 1445 McLaughlin Ave				11	2016					
,	State	Zip Code		FEC Ident	tification N	umber				
McLean Purpose of Disbursement	VA	22101								
Wire transfer fees	Category/ Type			C						
Candidate Name						: SB21B.6926				
				Amount o	ı ⊏a∪ıı DİS	bursement this Period				
Office Sought: House Disbursen	nent For:				-	200.00				
	Primary	General				,				
President State: District:	Other (spec	city)		Memo	Item					
Full Name (Last, First, Middle Initial)										
C. Chain Bridge Bank				Date of D	isburseme	nt				
				M M	/ D D	/ Y = Y = Y = Y				
Mailing Address 1445 McLaughlin Ave				11	21	2016				
,	State	Zip Code		FEC Ident	ification N	umber				
McLean Purpose of Disbursement	VA	22101								
Wire Transfer fees										
Candidate Name			Category/ Type	Transaction ID: SB21B.6927 Amount of Each Disbursement this Peri						
Office Sought: House Disbursen	nent For:	I	71.			200.00				
Senate	Primary	General			7	7				
President	Other (spec	cify) ▼		Memo	Item					
State: District:										
SUBTOTAL of Disbursements This Page (optional)					T	620.00				
TOTAL This Period (last page this line number only)				1						

S 17

SCHEDULE B (FEC Form 3X)			FOR LIN	NE NUMBER: PAGE 33 OF								
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	(check or		one) 22 23 26 27							
		d Summary Page	211		23 28c	26 27 29 30b						
Any information popular from such Departs and Oto	<u> </u>											
Any information copied from such Reports and Sta or for commercial purposes, other than using the r												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)												
A. Design 4 Advertising				Date of	Disburse	ment						
Mailing Address 106 N Collins St				10	2							
City	State FL	Zip Code 33563		FEC Ide	FEC Identification Number							
Plant City Purpose of Disbursement	I L	33363										
Editing Hiring Flyer			Г									
Candidate Name			Category/			ID: SB21B.9224 Disbursement this Period						
			Type	Amount	or Lacin	Disbursement this 1 chou						
Office Sought: House Disbur	sement For:			7 L		80.00						
Senate	Primary	General										
State: District:	Other (sp	ecify) \blacktriangledown		Me	mo Item							
Full Name (Last, First, Middle Initial)												
B. Edson, Timothy, , ,				Date of	Disburse	ement						
				M = M	/ D	D / Y Y Y Y						
Mailing Address 836 5th St NE				11	6 2016							
City	State	Zip Code		FEC Ide	FEC Identification Number C Transaction ID: SB21B.9215 Amount of Each Disbursement this Period							
Washington Purpose of Disbursement	DC	20002										
Director Expenses												
Candidate Name			Category/	-								
			Type									
Office Sought: House Disbur	sement For:			1446.31								
Senate	Primary	General										
President State: District:	Other (sp	ecity)		Me	mo Item							
Full Name (Last, First, Middle Initial)												
C. Escalante, Eileen, , ,				Date of	Disburse	ment						
Mailing Address 1200 New Hampshire Ave				10	/ D 2							
maining / datases 1200 New Hampshire Ave						20,0						
City	State	Zip Code		FEC Ide	entification	n Number						
Washington Purpose of Disbursement	DC	20036		C								
Expense Reimbursement												
Candidate Name	andidate Name Category/											
			Type			400.47						
	sement For:	0			-	129.17						
Senate President	Primary General Other (specify) ▼											
State: District:	Onler (sp	▼		Me	mo Item							
SUBTOTAL of Disbursements This Page (optiona	l)					1655.48						
TOTAL This Period (last page this line number or	ılv)											

SCHEDULE B (FEC Form 3X)						PAGE 3	34 OF 78				
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check only		00 🗔	00	07				
		Summary Page	X 21b 28a	22 28b	23 28c		27 30b				
Any information copied from such Reports and State	ments may	not he sold or us									
or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)				Data of Di-	hurooma-	+					
A. Escalante, Eileen, , ,				Date of Disbursement							
Mailing Address 1200 New Hampshire Ave				11 03 2016							
City	State	Zip Code	FEC Identif	ication Nu	mber						
Washington Purpose of Disbursement	DC	20036									
Expense Reimbursement				C	ation ID	ODO4P os					
Candidate Name			Category/	1		: SB21B.6894 sbursement this Period					
Office Country			Type								
Office Sought: House Disburse Senate	ement For: Primary	General				10	055.37				
President	Other (spe										
State: District:				Memo	item						
Full Name (Last, First, Middle Initial)											
B. Escalante, Eileen, , ,				Date of Disbursement 11 15 2016							
Mailing Address 1200 New Hampshire Ave											
Haming Addition 1200 New Hampshire Ave											
City	State	·			FEC Identification Number						
Washington Purpose of Disbursement	DC	20036									
Expense Reimbursement		Category/			Transaction ID : SB21B.6896 Amount of Each Disbursement this Per						
Candidate Name											
			Type								
Office Sought: House Disburse Senate	ment For: Primary	General			344.55						
President	Other (spe			п., .							
State: District:				Memo	Item						
Full Name (Last, First, Middle Initial)											
C. Fitzgerald, Tami, , ,				Date of Dis	bursemen						
Mailing Address 1200 New Hampshire Ave NW St	e 750			11	03	201	6				
City	State	Zip Code		FEC Identif	ication Nu	mber					
Washington Purpose of Disbursement	DC	20036									
Expense Reimbursement				C	etion ID :	SB21D 604	11				
Candidate Name		Category/	Amount of		SB21B.691 oursement t						
			Type				720.26				
Office Sought: House Disburse Senate	ement For: Primary	General			,		738.26				
President	Other (spe			П., .							
State: District:	(-6-	, ·		Memo	item						
SUBTOTAL of Disbursements This Page (optional).						20	638.18				
TOTAL This Period (last page this line number only	<i>(</i>)										
I I I I I I I I I I I I I I I I I I I	, ,			1 1 1	4 1 1						

SCHEDULE B (FEC Form 3X)	llos seri	arata aabadula/-\		FOR LINE NUMBER: PAGE 35							
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(check onl		22 23 26 27						
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b					
Any information copied from such Reports and State	ments may	not he sold or us									
or for commercial purposes, other than using the nar											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)				Data of F	iehuroomo	nt					
A. Fitzgerald, Tami, , ,				Date of Disbursement 11							
Mailing Address 1200 New Hampshire Ave NW Ste	e 750										
City	State	Zip Code									
Washington Purpose of Disbursement	DC	20036									
Expense Reimbursement			· · · ·	C							
Candidate Name			Category/			: SB21B.6912 sbursement this Period					
			Type	, anount o	. Lacii Dis						
	ment For:			1	7	195.22					
Senate	Primary	General									
State: District:	Other (spec	CIIY) ▼		Memo	ltem .						
Full Name (Last, First, Middle Initial)											
B. Greco, Grayson, , ,				Date of D	isburseme	nt					
				M = M / D = D / Y = Y = Y							
Mailing Address 1200 New Hampshire Ave NW St				11	03	2016					
City	State	Zip Code		FEC Identification Number							
Washington Purpose of Disbursement	DC	20036									
Expense Reimbursement				C							
Candidate Name		Category/ Type nent For: Primary General			Amount of Each Disbursement this Period 360.18						
Office Sought: House Disburse	ment For:										
Senate	Primary										
President	Other (spec	cify)		Memo Item							
State: District:				Ш							
Full Name (Last, First, Middle Initial)				Date of F	isburseme	nt					
C. Greco, Grayson, , ,				M M	/ D D	/ Y Y Y Y					
Mailing Address 1200 New Hampshire Ave NW Ste	e 750			11	15	2016					
City	State	Zip Code		FEC Iden	tification N	umber					
Washington Purpose of Disbursement	DC	20036									
Expense Reimbursement				C							
Candidate Name			Category/ Type	Transaction ID : SB21B.6906 Amount of Each Disbursement this Period							
Office Sought: House Disburse	ment For:		.7.5~	1 1		71.61					
Senate	Primary	General			7						
President	Other (spec	cify) ▼		Memo	ltem						
State: District:											
SUBTOTAL of Disbursements This Page (optional).			·····•		7	627.01					
TOTAL This Period (last page this line number only	')			1							

	CHEDULE B (FEC Form 3X)	Use sepa	rate schedule(s)				E NUMBER: PAGE 36 C						OF 78
I	EMIZED DISBURSEMENTS	for each of	category of the	(0	X	21b	22		23		26	27	
		Detailed	Summary Page			28a	28b		28c		29	30b	
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam												
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC												
۹.	Full Name (Last, First, Middle Initial) Headway Workforce Solutions Mailing Address 421 Fayetteville St #1020						Date of	of Di	D	D /	Y	2016	Y
	City State of the Control of the Con	State NC	Zip Code 27601				FEC I	denti	ification	n Nun	nber		
	Purpose of Disbursement Payroll fees Candidate Name		27001	<u> </u>	_		C Transaction ID : SB21B.92					-	
	Office Sought: House Disbursen	ment For:		Cate T	egor ype	ry/							
		Primary Other (spec	General ify) ▼				М	emo	Item		,		
3.	Full Name (Last, First, Middle Initial) Headway Workforce Solutions Mailing Address 421 Fayetteville St #1020						Date of	of Di	D	D /	Y	y y 2016	Y
	City Raleigh Purpose of Disbursement Director Payroll Candidate Name	State NC	Zip Code 27601	Cate		ry/	C	ansa	action	ID : S	B21B	-	Period
		nent For: Primary Other (spec	General General		ype		М	emo	Item		7	16569.1	17
С.	Full Name (Last, First, Middle Initial) Headway Workforce Solutions Mailing Address 421 Fayetteville St #1020				Date of Disbursement Transaction ID: SB21B.9220 Amount of Each Disbursement M M M J D J J 2016 FEC Identification Number C Transaction ID: SB21B.9220 Amount of Each Disbursement this If Transaction ID: SB21B.9221 Amount of Each Disbursement this If Transaction ID: SB21B.9221 Amount of Each Disbursement this If Memo Item Date of Disbursement M M M J D J J 2016 FEC Identification Number C Transaction ID: SB21B.9225 Amount of Each Disbursement this If Transaction ID: SB21B.9225 Amount of Each Disbursement this If Memo Item	Y							
	City Raleigh Purpose of Disbursement Processing fees Candidate Name	State NC	Zip Code 27601	Cate	egor	ry/	С	rans	action	ID : 9	SB21E	ent this	
		nent For: Primary Other (spec	General ▼				М	emo	Item		7	2191.9	91
S	UBTOTAL of Disbursements This Page (optional)					>	F	÷	7	-	7	73318.	48
Т	OTAL This Period (last page this line number only)							_	_	_	_	_	

S П

S	CHEDULE B (FEC Form 3X)								FOR LINE NUMBER: PAGE					
IT	EMIZED DISBURSEMENTS	I for each cotogon, of the			(check only one) x 21b 22 23					26 27				
			Summary Page		21b 28a	22 28b		3 8c	Н	26 29		27 30b		
Δι	ny information copied from such Reports and Staten	nents may n	ot he sold or us						of so				ne	
	for commercial purposes, other than using the name													
	NAME OF COMMITTEE (In Full)													
$ \rangle$	WOMEN SPEAK OUT PAC													
<u></u>	Full Name (Last, First, Middle Initial)					T								
A.	Hollar, Jeremy, , ,				Date of Disbursement									
						11 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						1		
	Mailing Address 1200 New Hampshire Ave NW Ste 750											4		
		State	Zip Code			FEC Identification Number								
	Washington	DC	20036				Jilliot	ttioii	ING	IIIDCI	_	-		
	Purpose of Disbursement Expense Reimbursement				7	C								
	Candidate Name			Category/		Tra Amount				SB21E		-	riod	
				Type		, anount	0. 20		5.00	4100111	_	_		
	Office Sought: House Disburser						_		2	15.90				
	Senate President	Primary Other (speci	General (ifv) ▼			п								
	State: District:	(-1	<i>3</i> / 4			Me	mo Ite	m						
	Full Name (Last, First, Middle Initial)													
В.	Hollar, Jeremy, , ,					Date of	Disbu	ırser	men					
	Mailing Address 1200 New Hampshire Ave NW					11 15 2016							1	
	Ste 750								_					
	,	State DC	Zip Code 20036			FEC Ide	entifica	ation	Nu	mber				
	Washington Purpose of Disbursement	20030				C								
	Expense Reimbursement				Transaction ID : SB21B.69						3 690	9		
	Candidate Name	Category/											riod	
	Office Sought: House Disbursen	Type			1							37.14	П	
	Senate	Primary				4 4						-	_	
		Other (specify)				Memo Item								
_	State: District:								_					
C.	Full Name (Last, First, Middle Initial) i360					Date of	Disbu	ırser	men	t				
•						M M	/ [D I	D	/ Y	Y	Y Y	7	
	Mailing Address P.O. Box 37046					10	J L	25	5	L	201	6		
	City	State	Zip Code											
	Baltimore	MD	21297-3046			FEC Ide	entifica	ation	Nu	mber	_	_		
	Purpose of Disbursement Subscription				7	C								
	Candidate Name				.					SB21I			riad	
				Category/ Type	′	Amount	OI Ea	ICH I	טוטט	ursem	ent tr	nis Pe	riod	
	Office Sought: House Disburser					<u></u>		_		-	25	00.00		
	Senate President	President Other (specify) ▼												
						Me	mo Ite	m						
Г								=	=	_	_	-	=	
8	UBTOTAL of Disbursements This Page (optional)			·····•	•	<u></u>		_	_		28	353.04		
Γ.	OTAL This Povind (lost page this line growth as and a				_	Г.							\neg	
1 '	OTAL This Period (last page this line number only)										-			

S П

S	CHEDULE B (FEC Form 3X)							38 O	F 78				
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check	•	′		00		00 F			
			Summary Page		21b 28a	22 28b		23 28c		26 29	27 30b		
Δι	ny information copied from such Reports and Staten	nonte may n	ot he sold or use									ions	
	for commercial purposes, other than using the name												
\setminus	NAME OF COMMITTEE (In Full)												
$ \rangle$	WOMEN SPEAK OUT PAC												
<u></u>	Full Name (Last, First, Middle Initial)					1							
A.	i360					Date of	f Disk	ourser	ment				
						11 11 2016						Υ	
	Mailing Address P.O. Box 37046											_	
	City	State	Zip Code			FFC Id	entific	cation	Nur	nber			
	Baltimore Purpose of Dishurasment	MD	21297-3046			FEC Identification Number							
	Purpose of Disbursement Digital Rev Share				71		C						
	Candidate Name			Category	,					SB21B urseme	.6929 ent this P	eriod	
				Type								-	
	Office Sought: House Disburser Senate	nent For: Primary				_	7	582.52	2				
	President	Other (spec	General ify) ▼			П.и.							
	State: District:					IVIE	mo I	tem					
_	Full Name (Last, First, Middle Initial)												
В.	i360					Date of	f Disk					_	
	Mailing Address P.O. Box 37046				-	M = M	/	25			2016	Y	
	City State Zip Code Baltimore MD 21297-3046							cation	Nur	nber			
	Purpose of Disbursement	2.23. 00.0					C						
	Subscription					Transaction ID : SB21B.693							
	Candidate Name	Category/					ent this P	eriod					
	Office Sought: House Disburser	Type nent For: Primary General				269						1	
	Senate												
		Other (spec			Me	mo It	tem						
_	State: District:												
C.	Full Name (Last, First, Middle Initial) Intuit					Date of	f Disk	ourser	ment				
						M M	1	D	D /	Y	YY	Υ	
	Mailing Address 2700 Coast Ave					10		25	5	L	2016		
	City	State	Zip Code			FF0 ! :	- v. 1. e.						
	Mountain View	CA	94043			FEC Id	entific	cation	Nur	nper			
	Purpose of Disbursement Credit card processing fees				٦l	C							
	Candidate Name									SB21B	ent this P	Pariod	
		'	Amoun	t OI L	_acii i	DISDI	JI Sellie	;iii iiii5 F	enou				
	Office Sought: House Disburseme					L				7	129.20)	
	Senate President		☐ General										
	State: District:					Me	mo I	tem					
Г	<u>'</u>						-	-	-			$\overline{}$	
S	SUBTOTAL of Disbursements This Page (optional)								_	7	3409.3	3	
\[\	OTAL This Period (last page this line number only)				_								
	- I - I - I - I - I - I - I - I - I - I							,	_				

SCHEDULE B (FEC Form 3X)			FOR LINE	NUMBER:		PAGE	39 OF 78				
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	(check on	<i>'</i> ′	¬ —	00	1 07				
		d Summary Page	215		23 28c	26	27 30b				
Any information conicd from such Deposits and Chat											
Any information copied from such Reports and State or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)											
A. Intuit				Date of D	isbursemen	it					
Mailing Address 2700 Coast Ave				11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
City	State	Zip Code		FEC Identification Number							
Mountain View	CA	94043			incation No	iiiibei	_				
Purpose of Disbursement Credit Card Processing fees											
Candidate Name						ID : SB21B.6931					
Canadate Name			Category/ Type	Amount o	t Each Disk	ursement	this Period				
Office Sought: House Disburse	ement For:		71: -	11:::			15.95				
Senate	Primary	General		7 7 7							
State: President State:	Other (sp	ecify) \blacktriangledown		Memo Item							
Full Name (Last, First, Middle Initial)				 							
B. Intuit				Date of D	isbursemen	ıt					
				M = M	/ D D		YYY				
Mailing Address 2700 Coast Ave				11	04	20	016				
City	State CA	Zip Code		FEC Iden	tification Nu	ımber					
Mountain View Purpose of Disbursement	CA	94043		C							
Credit card processing fees					action ID :	SD21D 69	207				
Candidate Name			Category/	Amount of Each Disbursement this I							
Office Sought: House Disburse	mant Fari		Туре		40.20						
Office Sought: House Disburse Senate	ement For: Primary	General	40.20								
President	Other (sp			П							
State: District:	_			Memo) Item						
Full Name (Last, First, Middle Initial)											
C. Kirkman, Jason, , ,					isbursemen						
Mailing Address 1200 NEw Hampshire Ave				MM	03		016				
Ste 750											
City	State	Zip Code		FEC Iden	tification Nu	ımber					
Washington Purpose of Disbursement	DC	20036		C			_				
Expense Reimbursement					saction ID :	SR21R 60	003				
Candidate Name			Category/			_	this Period				
Office Sought: House Disburse	mont Fam		Type				198.93				
Office Sought: House Disburse Senate	ement For: Primary	General			7	7	100.30				
President) Item						
State: District:	State: District:										
							055.00				
SUBTOTAL of Disbursements This Page (optional)			······································		7	7	255.08				
TOTAL This Period (last page this line number only	v)										

SCHEDULE B (FEC Form 3X)	11	anata selectivity	FOR LINE	NUMBER:		PAGE 40 OF 78					
ITEMIZED DISBURSEMENTS		parate schedule(s) a category of the	(CILCON OIL	· — · —	¬ ₀₀ ⊏						
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b					
Any information copied from such Departs and Chat	omonto ma	not be sold as									
Any information copied from such Reports and Stat or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)				5							
A. Kirkman, Jason, , ,				Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y							
Mailing Address 1200 NEw Hampshire Ave											
Ste 750	T										
City Washington	State	Zip Code 20036		FEC Identification Number							
Purpose of Disbursement		20030		C							
Expense Reimbursement			1 1		action ID	: SB21B.6907					
Candidate Name			Category/		sbursement this Period						
Office Coughts House			Type			63.85					
Office Sought: House Disburs Senate	ement For: Primary	General			7	03.00					
President	Other (spe			NAmes	o Item						
State: District:				Memo) item						
Full Name (Last, First, Middle Initial)											
B. Lee, Laurie, , ,				Date of D	isburseme						
Mailing Address 1104 Westpoint Court					11 18 2016						
Maining Address 1104 Westpoint Court					10	2010					
City	State	Zip Code		FEC Iden	tification N	lumber					
Little Rock Purpose of Disbursement	AR	72211									
Expense Reimbursement				C							
Candidate Name					Transaction ID : SB21B.6 Amount of Each Disbursemen						
	ement For:				5682						
Senate President	Other (spe	General									
State: District:	Other (spe	cony)		Memo	o Item						
Full Name (Last, First, Middle Initial)											
C. Lee, Laurie, , ,				Date of D	isburseme	ent					
Matthew Address 440444				M M	/ D D	/					
Mailing Address 1104 Westpoint Court				11	18	2016					
City	State	Zip Code		FEC Iden	tification N	Jumher					
Little Rock	AR	72211			unoauon 1	varibor					
Purpose of Disbursement Expense Reimbursement											
Candidate Name			Cotogony	Transaction ID : SB21B.6899 Amount of Each Disbursement this Period							
			Category/ Type	Amount	I Lacii Di	spursement this renou					
	ement For:			1	4	884.60					
Senate	Primary	General									
State: District:	Other (spe	есіту) 🔻		Memo	o Item						
State. District.											
SUBTOTAL of Disbursements This Page (optional))				- ·	6630.61					
3, (,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				-							
TOTAL This Period (last page this line number on	ly)			1							

SCHEDULE B (FEC Form 3X)	l le -	unda note and 1 ()	FOR LINE NUMBER: PAGE 41 O)F 78		
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check					00 5			
		Summary Page		21b 28a	22 28b	23 28c	Н	26 29	27 30b		
Any information copied from such Departs and Statement	onte mau -	not he cold or								iono	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam											
NAME OF COMMITTEE (In Full)											
WOMEN SPEAK OUT PAC											
Full Name (Last, First, Middle Initial)					Date of Disbursement						
A. Love, Julie, , ,					Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
Mailing Address 1200 New Hampshire Ave NW Ste	750										
,	State	Zip Code			FEC Identification Number						
i de i i i gre i	DC	20036				Ji i i i i i i i i i i i i i i i i i i	311 TTG				
Purpose of Disbursement Expense Reimbursement			· · ·	$\neg \bot$	C						
Candidate Name			Cotoco		Transaction ID : SB21B.6913 Amount of Each Disbursement th						
			Category Type	′′	Amount	oi Laul	י הפום	ai 3 0 1116		-	
Office Sought: House Disbursem								-	390.7	9	
	Primary										
State: District:	otner (spec	city) 🔻			Me	mo Item					
Full Name (Last, First, Middle Initial)											
B. Love, Julie, , ,					Date of	Disburs	emen	t			
					M = M	/ D	D	/ Y	YY	Υ	
Mailing Address 1200 New Hampshire Ave NW Ste	750	Zip Code			11		15	L	2016		
,	State DC		FEC Ide	entificati	on Nu	mber					
washington Purpose of Disbursement	DC 20036				С			-			
Expense Reimbursement						nocetic	a ID : 1	SDOAD	6024		
Candidate Name	Category/ Type			//		nsaction of Eacl			.6921 ent this F	Period	
Office Sought: House Disbursem						-		-	189.3	5	
	Primary General										
State: District:	Other (spec	иту)		Me	mo Item						
Full Name (Last, First, Middle Initial)											
C. Love, Julie, , ,					Date of	_	emen		Y W Y	Y	
Mailing Address 1200 New Hampshire Ave NW Ste	750				11		15	Ĺ	2016		
,	State	Zip Code			FEC Ide	entificati	on Nu	mber			
washington Purpose of Disbursement	DC	20036					_		-		
Expense Reimbursement				$\neg \bot$				00.00			
Candidate Name	Candidate Name Category/ Type								.6922 ent this F	Period	
Office Sought: House Disbursem	nent For:							40	441.3	5	
	Primary	General									
	Other (spec	cify) 🔻			Me	mo Item					
State: District:					_						
SUBTOTAL of Disbursements This Page (optional)		·····		>		-	_	7	1021.4	19	
TOTAL This Period (last page this line number only).				_							

SCHEDULE B (FEC Form 3X)	11	anaka sahari 1773	FOR LI	INE N	JMBER:			PAGE	42 0	F 78		
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	(0110011					- -				
		Summary Page		21b 28a	22 28b	23 28c		26 29	27 30b			
Any information conind from such Describe and Otatan												
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)												
A. Miller, Desiree, , ,					Date of Disbursement							
Mailing Address 1200 New Hampshire Ave, NW Suite 750		1			11 03 2016							
City Washington	State DC	Zip Code 20036			FEC Identification Number							
Purpose of Disbursement Expense Reimbursement				7	Transaction ID : SB21B.6904 Amount of Each Disbursement this Per							
Candidate Name			Category									
Office Cought			Type						333.35	-		
Office Sought: House Disburser Senate	nent For: Primary			7			333.33					
President	Other (spe	ecify) 🔻			Mer	no Item						
State: District:												
Full Name (Last, First, Middle Initial) B. Miller, Desiree, , ,					Date of	Disburse	ement					
Willier, Desiree, , ,					M = M		D /	Υ	Y Y Y			
Mailing Address 1200 New Hampshire Ave, NW Suite 750					11	1	5	L.	2016			
,	State DC	Zip Code			FEC Ide	ntificatio	n Nun	nber				
Washington Purpose of Disbursement	DC	20036		C								
Expense Reimbursement	Primary General					.6908						
Candidate Name				7		ent this P	eriod					
Office Sought: House Disburser									69.34			
Senate												
President State: District:	Other (spe	ecify)			Mer	no Item						
Full Name (Last, First, Middle Initial)												
C. Parker, Mary, , ,						Disburse						
Mailing Address 1200 New Hampshire Ave NW Ste	750				11	1	5		2016			
City	State	Zip Code			FEC Ide	ntificatio	n Nun	nber				
Washington Purpose of Disbursement	DC	20036							-			
Expense Reimbursement			T		C	nsaction	ID · ·	2D24D	6014			
Candidate Name			Category/ Type	/					ent this P	eriod		
Office Sought: House Disburser	ment For:		.,,,,			400			578.32			
Senate	Primary	General										
State: President State:	Other (spe	ecity) 🔻	Memo Item									
Side Side Side Side Side Side Side Side							-			-		
SUBTOTAL of Disbursements This Page (optional))	•					981.0	1		
TOTAL This Posted (feet												
TOTAL This Period (last page this line number only)					1							

SCHEDULE B (FEC Form 3X)	1			NE NUMBI	R:		PA	AGE 43	OF 78			
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the		only one)	_	¬						
		Summary Page		21b 22 28a 28	<u>,</u>	23 28c	26	27 30b				
Anni information coming from such Demants and Otate									.4:			
Any information copied from such Reports and State or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)				Date								
A. Parker, Mary, , ,				М	Date of Disbursement							
Mailing Address 1200 New Hampshire Ave NW St		1		1	11 15 2016							
City Washington	State DC	Zip Code 20036		FEC	Ident	ification	n Numbe	er				
Purpose of Disbursement		20030				-						
Expense Reimbursement												
Candidate Name			Category				D: SB21B.6915 Disbursement this Period					
			Type	7			2.000.00					
Office Sought: House Disburse	ement For:					-	-	2073.	10			
Senate	Primary	General					,					
President	President Other (specify) ▼ State: District:											
Full Name (Last, First, Middle Initial)												
B. Parker, Mary, , ,				Date	of D	isburse	ment					
- Faiker, Mary, , ,				M	M = M / D = D / Y = Y = Y							
Mailing Address 1200 New Hampshire Ave NW S	te 750				1	1		2016				
City	State	Zip Code		FEC	Ident	ification	n Numbe	er				
Washington Purpose of Disbursement	DC	20036										
Expense Reimbursement												
Candidate Name			0-1	_	1B.6916	Daviad						
			Category Type	Amo	unit oi	ement this	Period					
Office Sought: House Disburse	ement For:	I .		TI.	10							
Senate	Primary					4 4						
President	Other (spe	ecify)		Memo Item								
State: District:												
Full Name (Last, First, Middle Initial) C. Paychex				Date	of D	isburse	ment _					
Mailing Address 3060 Williams Dr #200				1	_	0.		2016	Y			
City	State	Zip Code			اطم ۱	ificati-	Nivo-b-	· · · · · · · · · · · · · · · · · · ·				
Fairfax	VA	22031		FEC	iuent	meallor	n Numbe	71				
Purpose of Disbursement Payroll expenses					Trans	action	ID · SB2	21R 6934				
Candidate Name			Category Type		Transaction ID : SB21B.6934 Amount of Each Disbursement this							
Office Sought: House Disburse	ement For:			$\exists 1$				55.	51			
Senate	Primary	General		7								
President	ecify) 🔻		П	Memo	Item							
State: District:												
SUBTOTAL of Disbursements This Page (optional)						7		2246	.71			
TOTAL This Period (last page this line number only	<i>(</i>)					-						

SCHEDULE B (FEC Form 3X)			FOR LIN	IE NUMBER	:	PAGE 44 OF 78						
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check c									
		Summary Page	X 2°	3a 22 28b	23 28c	26 27 29 30b						
Any information copied from such Reports and State	manta may	not be cold or up										
or for commercial purposes, other than using the nar												
NAME OF COMMITTEE (In Full)												
WOMEN SPEAK OUT PAC												
Full Name (Last, First, Middle Initial)				5.	Date of Disbursement							
A. Paychex												
Mailing Address 3060 Williams Dr				11 08 2016								
#200												
City Fairfax	State VA	Zip Code 22031		FEC Id	dentificatio	n Number						
Purpose of Disbursement	VA	22031										
Payroll expenses												
Candidate Name			Category/			ID: SB21B.6935 Disbursement this Period						
			Type	7								
	ment For:					55.51						
Senate President	Primary	General										
State: District:	Other (spe	ecny) 🔻		Me	emo Item							
Full Name (Last, First, Middle Initial)												
B. Paychex				Date o	of Disburse	ement						
Mailing Address 3060 Williams Dr						0 2016						
#200						2010						
City Fairfax	State VA	Zip Code 22031		FEC Id	dentificatio	n Number						
Purpose of Disbursement	***	22001		С								
Payroll expenses					ID : SB21B.6936							
Candidate Name			Category/	Amount of Each Disbursement this Pe								
Office Sought: House Disburse	mant Far	Туре			70.3							
Senate Dispurse	nent For: Primary General			10.33								
President	Other (spe			Mana Ham								
State: District:				IVIO	emo Item							
Full Name (Last, First, Middle Initial)												
C. Trace Strategies, LLC					of Disburse							
Mailing Address 11104 Westpoint Court				11		4 2016						
Cit.	Otata	7:- Or -1-										
City Litte Rock	State AR	Zip Code 72211		FEC Id	dentificatio	n Number						
Purpose of Disbursement				С								
Director Payroll, FL			L		ansaction	ID : SB21B.9213						
Candidate Name			Category/	Amour	nt of Each	Disbursement this Period						
Office Sought: House Disburse	ment For:		Type			7000.00						
Senate Primary G						4						
President	President Other (specify) ▼				emo Item							
State: District:					anio iteni							
						7405.04						
SUBTOTAL of Disbursements This Page (optional)			·····•		-	7125.84						
TOTAL This Period (last page this line number only)											

SCHEDULE B (FEC Form 3X)							GE 45 O	F 78			
ITEMIZED DISBURSEMENTS		parate schedule(s) n category of the	I `	only one)		□ 00					
		Summary Page		21b 22 28a 28		23 28c	26	27 30b			
Anni information coming from such Demants and Otak											
Any information copied from such Reports and State or for commercial purposes, other than using the na											
NAME OF COMMITTEE (In Full)											
Full Name (Last, First, Middle Initial)											
A. Trace Strategies, LLC				Date	Date of Disbursement						
Mailing Address 11104 Westpoint Court				1	11 04 2016						
City Litte Rock	State AR	Zip Code 72211		FEC	FEC Identification Number						
Purpose of Disbursement	AIX	72211									
Oct/Nov Payroll Director, MO					_		ID 000	45.0040			
Candidate Name			Category	_			ID: SB21B.9216 Disbursement this Period				
			Type		-				-		
	ement For:					7		15000.00	J		
Senate President	Primary Other (sp	General									
State: District:	Other (op	Cony) V		ш	Memo	Item					
Full Name (Last, First, Middle Initial)											
B. Trace Strategies, LLC				Date	of D	isburse	ment				
M 32 A 11				M	M	/ D	- '	Y	Υ		
Mailing Address 11104 Westpoint Court					1	Ū	4	2016			
City	State	Zip Code		FEC	Iden	tificatior	n Numbe	r			
Litte Rock Purpose of Disbursement	AR	72211									
Director Payroll, OH				4B 0247							
Candidate Name		_	Transaction ID: SB21B.9217 Amount of Each Disbursement this								
Office Occupies			Type		7000.00						
Office Sought: House Disburse Senate	Primary	ment For: Primary General			7000.00						
President	Other (sp			п.,							
State: District:	, , ,	• ,			Memo Item						
Full Name (Last, First, Middle Initial)											
C. Williams, Petrina, , ,				Date	of D	isburse					
Mailing Address 1200 New Hampshire Ave NW St	e 750			M	1) 0:		2016	Y		
City	Stata	Zin Code									
City Washington	State DC	Zip Code 20036		FEC	Iden	tificatior	n Numbe	r			
Purpose of Disbursement	l			C							
Expense Reimbursement] [Trans	saction	ID : SB2	1B.6900			
Candidate Name			Category	Amo	unt o	f Each	Disburse	ment this P	'eriod		
Office Sought: House Disburse	ement For:		Туре	$\dashv \sqcap$				628.1	7		
Senate	Primary	General									
President	Other (sp	ecify) ▼		П	Memo	Item					
State: District:											
SUPTOTAL of Dishuranesets This Days (antique)								22628.1	7		
SUBTOTAL of Disbursements This Page (optional)			······)	<u> </u>	=	7			#		
TOTAL This Period (last page this line number only	<i>y</i>)		1						_ [

SCHEDULE B (FEC Form 3X)	Hoo see s	wata aabadula/-\	FOR LINE NUMBER: PAGE 46 (
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check on	· — · —	□					
		Summary Page	X 21b 28a	22 28b	23 28c	26 27 29 30b				
Any information copied from such Reports and Statem	l nents may n	not he sold or us								
or for commercial purposes, other than using the nam										
NAME OF COMMITTEE (In Full)										
WOMEN SPEAK OUT PAC										
Full Name (Last, First, Middle Initial)				Date of Disbursement						
A. Williams, Petrina, , ,				11 03 2016						
Mailing Address 1200 New Hampshire Ave NW Ste	750									
,	State	Zip Code		FEC Identification Number						
Washington Purpose of Disbursement	DC	20036								
Expense Reimbursement				C	. CD24D C224					
Candidate Name			Category/			: SB21B.6901 sbursement this Period				
Office Cought			Туре			553.89				
Office Sought: House Disbursen Senate	nent For: Primary	General			7	553.69				
	Other (spec			Memo Item						
State: District:				Memo	item					
Full Name (Last, First, Middle Initial)										
B. Williams, Petrina, , ,				Date of D	isburseme					
Mailing Address 1200 New Hampshire Ave NW Ste	750			MM	15	2016				
T200 New Hampshire Ave NW Ste	730				10	2010				
,	State	Zip Code		FEC Iden	tification N	umber				
Washington Purpose of Disbursement	DC	20036								
Expense Reimbursement	Category/			Transaction ID : SB21B.6910 Amount of Each Disbursement th						
Candidate Name										
			Туре							
Office Sought: House Disbursem	nent For: Primary	General			7	243.37				
	Other (spec									
State: District:	(5630	<i>,</i>		Memo) Item					
Full Name (Last, First, Middle Initial)										
C.				Date of D	isburseme	nt				
Mailing Address				M I M	/ D D	/ Y Y Y Y Y				
Maining Addiess										
City	State	Zip Code		FEC Iden	tification N	umber				
Purpose of Disbursement										
. arposo or biobardoment				C.						
Candidate Name			Category/	Amount o	f Each Dis	bursement this Period				
			Type							
Office Sought: House Disbursem		Ganaral			_					
	Primary Other (spec	General								
State: District:	- 1.101 (opec			Memo	ltem .					
				-						
SUBTOTAL of Disbursements This Page (optional)	•••••					797.26				
						139105.37				
TOTAL This Period (last page this line number only).					4 4 4	133103.37				

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 47
FOR LINE NUMBER: (check only one)

9 **X** 10

OF

78

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Existing Loan owed to SBA Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington DC 20036 Transaction ID: SD10.4157 Outstanding Balance Beginning This Period 10500.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 10500.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Loan for FEC Reporting Services Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.4110 5000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 5000.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailings Expense Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington DC 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.4318 5204.43 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 5204.43 20704.43 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 48 (FOR LINE NUMBER: (check only one)

	9
X	10

78

NAME OF COMMITTEE (In Full) WOMEN SPEAK OUT PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original transactions put on SBA CC Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington DC 20036 Transaction ID: SD10.6625 Outstanding Balance Beginning This Period 8610.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 8610.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Expense put on SBA CC Susan B Anthony List, Inc. Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.6756 4709.73 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 4709.73 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): To post Thrifty Car Rental Expense put on Susan B Anthony List, Inc. SBA Card Mailing Address 1200 New Hampshire Ave NW Ste 750 City State Zip Code Washington DC 20036 Outstanding Balance Beginning This Period Transaction ID: SD10.9222 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 1894.83 1894.83 15214.56 1) SUBTOTALS This Period This Page (optional)..... 35918.99 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 35918.99 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

TEMIZED INDEFENDENT EXPENDITOR	XL3			PAGE 49 OF 78				
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X				
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼				
WOMEN SPEAK OUT FAC				C C00530766				
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y				
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination				
American Marketing & Publishing				10 28 2016				
Mailing Address 7380 Sprout Springs Rd			Am	nount				
Ste 210-248 City	· · · · · · · · · · · · · · · · · · ·							
Flowery Branch								
Purpose of Expenditure Door Hangers- UT								
Name of Federal Candidate:		✗ Support	Office So	ught:				
LOVE, MIA, , ,		Oppose		sident Senate State: UT				
Calendar Year-To-Date Per Election for Office Sought		23093.37	Disbursen 2016	nent For:				
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination				
American Marketing & Publishing								
Mailing Address 7380 Sprout Springs Rd								
Ste 210-248			Am	nount				
City	State	Zip Code		2565.00				
Flowery Branch	GA	30542		ansaction ID : SE.6782 te of Disbursement or Obligation				
Purpose of Expenditure Door Hangers- UT		Category/ Type 006		10 28 2016				
Name of Federal Candidate:		Support	Office So	ught: X House District: 04				
OWENS, H DOUGLAS, , ,		X Oppose	Pre	sident Senate State: UT				
Calendar Year-To-Date Per Election for Office Sought		25658.37	Disbursen	nent For: Primary Seneral				
Tel Election for Office cought				Other (specify) ►				
(a) SUBTOTAL of Itemized Independent Expendi	tures			5130.00				
(a) SUBTOTAL of Unitemized Independent Exper	nditures							
			, <u> </u>	7				
(a) TOTAL Independent Expenditures			•					
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any ca party committee) any political party committee of	ndidate or authorized	•		•				
Buchanan, Emily, , ,	[Electronically Fil	ed] Date	e 05	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
Signature		_ Buit						

TEMIZED INDEPENDENT EXPENDITURES				PAGE 50 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	=M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Delta Airlines				11 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1030 Delta Blvd			Amou	nt
City	State	Zip Code	П Г.	3750.00
Atlanta	GA	30354		saction ID : SE.6869 of Disbursement or Obligation
Purpose of Expenditure Flights for canvassing deployment 11/5-11/6		Category/ Type 002		11 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	nt: X House District: 04
LOVE, MIA, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 7	51408.37	Disbursemer 2016	nt For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	l _	of Public Distribution/Dissemination
Delta Airlines			_ n	11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1030 Delta Blvd				11 05 2016
1030 Della Bivu			Amou	nt
City	State	Zip Code		3750.00
Atlanta	GA	30354		saction ID : SE.6871 of Disbursement or Obligation
Purpose of Expenditure Flights for canvassing deployment 11/5-11/6		Category/ Type 002		11 / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sough	nt: House District:
LEE, MIKE, , ,		Oppose	Presid	ent Senate State: UT
Calendar Year-To-Date		20202.70	Disbursemer	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	39302.70	2016 c	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	7500.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures			•	.,.,,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Buchanan, Emily, , ,	Electronically File	adl	M = M /	D D / Y Y Y Y Y
Signature	ъснопишу ГШ	Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 51 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Embassy Suites Columbus			[11 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2700 Corporate Exchange Dr.			Amou	unt
City	State	Zip Code	$ \Gamma$	1750.00
Columbus	ОН	43231		saction ID : SE.6874 of Disbursement or Obligation
Purpose of Expenditure Lodging for canvassing deployment 11/5-11/6		Category/ Type 002		11 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
STRICKLAND, TED, , ,		x Oppose	Presid	dent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	T T	57163.97	Disburseme	nt For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Embassy Suites Columbus			1	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2700 Corporate Exchange Dr.				11 00 2010
			Amo	unt
City	State	Zip Code		1750.00
Columbus	ОН	43231		nsaction ID : SE.6878 of Disbursement or Obligation
Purpose of Expenditure Lodging for canvassing deployment 11/5-11/6		Category/ Type 002		11 / 05 / 2016
Name of Federal Candidate:		Support	Office Soug	ht: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	X Presid	dent Senate State:
Calendar Year-To-Date		297342.65	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	7 - 1 - 1 - 1	20.0.2.00	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· -	3500.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res		. •	
(a) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically Fil	od1	M = M /	D D / Y T Y T Y T Y
Signature	- Биси опишну I Ш	Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITORES				PAGE 52 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Enterprise Rent a Car				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 843 State Street			Amo	unt
City	State	Zip Code		5000.00
Salt Lake City	UT	84111	I	saction ID : SE.6856 of Disbursement or Obligation
Purpose of Expenditure Van Rental for canvassing deployment 11/5-11/6		Category/ Type 002		M M M / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 04
LOVE, MIA, , ,		Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought	7	40158.37	Disburseme 2016	ent For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Enterprise Rent a Car				11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 843 State Street			Amo	unt
City	State	Zip Code		5000.00
Salt Lake City	UT	84111		nsaction ID : SE.6858 of Disbursement or Obligation
Purpose of Expenditure Van Rental for canvassing deployment 11/5-11/6		Category/ Type 002		M M / 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Soug	ht: House District:
LEE, MIKE, , ,		Oppose	Presi	dent Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	7	28052.70	Disburseme	ent For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· -	10000.00
(a) SUBTOTAL of Unitemized Independent Expenditur	'es			
(a) TOTAL Independent Expenditures			· • [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically File	ed]	M M /	17 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	9 05	2017

TEMIZED INDEPENDENT EXPENDITURES	;			PAGE 53 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	"M / D "D / Y "Y "Y "Y
Full Name of Payee Facebook, Inc.		Memo	1011	of Public Distribution/Dissemination
Mailing Address 1 Hacker Way			Amou	
City	State	Zip Code	-	268.25
Menio Park	CA	94025		saction ID : SE.6655 of Disbursement or Obligation
Purpose of Expenditure Lodging for canvassers	1	Category/ Type 002		10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	nt: House District:
STRICKLAND, TED, , ,		X Oppose	Presid	ent 🗷 Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7	50730.24	Disbursemer 2016	nt For: Primary
Full Name of Payee Fairfield Inn		☐ Memo	Item Date	of Public Distribution/Dissemination
				10 22 7 2016
Mailing Address 5285 Broadmoor Cir NW			Amou	nt
City	State	Zip Code	-	536.50
Canton	ОН	44709	I	saction ID : SE.6644 of Disbursement or Obligation
Purpose of Expenditure Lodging for canvassers		Category/ Type 002		10 22 7 2016
Name of Federal Candidate:		Support	Office Sough	nt: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	X Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought		251797.32	Disbursemer	
	1 1		C	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	3		.	804.75
(a) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	[Electronically Fil	ed]	M M /	17 2017
Signature		Date	, 03	2017

TEMIZED INDEPENDENT EXPENDITURES	3			PAGE 54 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Fairfield Inn				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5285 Broadmoor Cir NW			Amo	unt
City	State	Zip Code		536.50
Canton	ОН	44709	I	saction ID : SE.6647 of Disbursement or Obligation
Purpose of Expenditure Lodging for canvassers 10/22-10/23		Category/ Type 002		10 22 / Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Name of Federal Candidate:		Support	Office Soug	ght: House District:
STRICKLAND, TED, , ,		x Oppose	Presi	dent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 7	50094.53	Disburseme	ent For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Fairfield Inn				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 5285 Broadmoor Cir NW			, "	
			Amo	unt
City	State	Zip Code		268.25
Canton	ОН	44709		nsaction ID : SE.6653 of Disbursement or Obligation
Purpose of Expenditure Lodging for canvassers		Category/ Type 002		M 10 / 23 / Y Y 2016
Name of Federal Candidate:		Support	Office Soug	ght: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	X Presi	dent Senate State:
Calendar Year-To-Date		252433.03	Disburseme	ent For: Primary General
Per Election for Office Sought	7-1-1-7-	202400.00	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditu				804.75
(a) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	[Flastronia -II. T'	ladi	M = M /	D D / Y Y Y Y Y
Signature	[Electronically Fil	ed) Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 55 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Headway Workforce Solutions				10 24 7 2016
Mailing Address 421 Fayetteville St #1020			Amo	punt
City	State	Zip Code	$ \vdash$ \vdash	10000.00
Raleigh	NC	27601		nsaction ID : SE.6664
Purpose of Expenditure Payroll for canvassers		Category/ Type 001		e of Disbursement or Obligation 10 24 2016
Name of Federal Candidate:		Cumant	Office Court	District.
CLINTON, HILLARY RODHAM, , ,		Support Oppose	Office Soug	
Colondar Voor To Data		8 -PF	Disburseme	
Calendar Year-To-Date Per Election for Office Sought		262616.76	2016	Other (specify) >
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Headway Workforce Solutions				M M / D D / Y Y Y Y Y 1 Y 1 1 1 2 1 2 1 6
Mailing Address 421 Fayetteville St #1020			A ma	
			Amo	
City	State	Zip Code	Tro	10000.00 nsaction ID : SE.6666
Raleigh	NC	27601		e of Disbursement or Obligation
Purpose of Expenditure Payroll for Canvassers		Category/ Type 001	□	10 24 7 2016
Name of Federal Candidate:		Support	Office Soug	ght: House District:
MURPHY, PATRICK E, , ,		✗ Oppose	Presi	dent Senate State: FL
Calendar Year-To-Date		53196.26	Disburseme	ent For: Primary Seneral
Per Election for Office Sought	7		2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				20000.00
(a) SUBTOTAL of Unitemized Independent Expenditur	'es		· •	
(a) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	[Electronically Fil	led1 -	M = M /	/ D D / Y Y Y Y Y
Signature		Date	e 05	17 2017

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee Headway Workforce Solutions 10 24 2016 Mailing Address 421 Fayetteville St #1020 Amount State Zip Code 2500.00 City NC 27601 Transaction ID: SE.6668 Raleigh Date of Disbursement or Obligation Purpose of Expenditure Category/ Mileage for canvassers 002 10 2016 Type Name of Federal Candidate: Support Office Sought: House District: CLINTON, HILLARY RODHAM, , , Oppose **x** President Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 265116.76 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item **Headway Workforce Solutions** 2016 24 10 Mailing Address 421 Fayetteville St #1020 Amount 2500.00 City State Zip Code Transaction ID: SE.6670 Raleigh NC 27601 Date of Disbursement or Obligation Purpose of Expenditure Category/ Mileage for canvassers 002 24 2016 10 Type Name of Federal Candidate: Support Office Sought: House District: MURPHY, PATRICK E, , , FL Oppose X President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 55696.26 2016 Per Election for Office Sought Other (specify) ▶ 5000.00 (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Buchanan, Emily, , , [Electronically Filed] 17 2017 Date Signature

PAGE

56

OF

TEMIZED INDEPENDENT EXPENDITURES				PAGE 57 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	te of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Am	nount
City	State	Zip Code	-	11671.50
Raleigh	NC	27601	I	ansaction ID : SE.6787 te of Disbursement or Obligation
Purpose of Expenditure Actual Payroll for canvassers 10/27-11/8 NC, had r estimate of 28832.50	eported	Category/ Type 001		11 15 / 2016
Name of Federal Candidate:		Support	Office So	ught: House District:
CLINTON, HILLARY RODHAM, , ,		X Oppose	x Pre	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 7	310514.15	Disbursen 2016	nent For:
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020				10 27 2010
4211 dyelleville ot #1020			Am	nount
City	State	Zip Code		11671.50
Raleigh	NC	27601		ransaction ID : SE.6789 te of Disbursement or Obligation
Purpose of Expenditure Actual Payroll for canvassers 10/27-11/8 NC, had estimate of 28832.50	reported	Category/ Type 001		11 15 / 2016
Name of Federal Candidate:		Support	Office So	ught: House District:
ROSS, DEBORAH K, , ,		x Oppose	Pre	sident Senate State: NC
Calendar Year-To-Date		75800.94	Disbursen	nent For: Primary X General
Per Election for Office Sought	7 7		2010	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	S			23343.00
(a) SUBTOTAL of Unitemized Independent Expenditu	res			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•		·
Buchanan, Emily, , ,	[Electronic -II. F.	ladi	М = М	/ D D / Y D Y T Y T Y
Signature	[Electronically Fi	Date Date	9 05	17 2017
•				

TEMIZED INDEPENDENT EXPENDITURE	S			PAGE 58 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo		= M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions			[10 27 2016
Mailing Address 421 Fayetteville St #1020			Amou	ınt
City	State	Zip Code		2532.02
Raleigh	NC	27601		saction ID : SE.6791 of Disbursement or Obligation
Purpose of Expenditure Actual Mileage for canvassers 10/27-11/8 NC, had estimate of 5690.63	d reported	Category/ Type 002		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	ht: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	x Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought		313046.17	Disbursemer 2016	nt For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020				
,			Amou	ınt
City	State	Zip Code		2532.01
Raleigh	NC	27601	I	saction ID : SE.6793 of Disbursement or Obligation
Purpose of Expenditure Actual Mileage for canvassers 10/27-11/8 NC, had estimate of 5690.63	ad reported	Category/ Type 002		11 15 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
ROSS, DEBORAH K, , ,		x Oppose	Presid	lent Senate State: NC
Calendar Year-To-Date		78332.95	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	7-1-1-1	70002.00	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		· [5064.03
(a) SUBTOTAL of Unitemized Independent Expendi	tures		· •	
(a) TOTAL Independent Expenditures			•	. , ,
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candiparty committee) any political party committee or in	date or authorized			
Buchanan, Emily, , ,	[Electronically Fil	led1	M = M /	D D / Y T Y T Y
Signature	ь в в в в в в в в в в в в в в в в в в в	Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 59 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		/ D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions			[10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Amou	unt
City	State	Zip Code		40804.88
Raleigh	NC	27601		saction ID : SE.6797 of Disbursement or Obligation
Purpose of Expenditure Actual Payroll for canvassers 10/27-11/8 FL, has repestimate of 52443.75	oorted	Category/ Type 001		11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	, ,	353851.05	Disburseme	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions			[10 26 / 2016
Mailing Address 421 Fayetteville St #1020			Amou	unt
City	State	Zip Code	$ \Gamma$	40804.88
Raleigh	NC	27601		nsaction ID : SE.6799 of Disbursement or Obligation
Purpose of Expenditure Actual Payroll for canvassers 10/27-11/8 FL, has reestimate of 52443.75	eported	Category/ Type 001		11 15 2016
Name of Federal Candidate:		Support	Office Soug	ht: House District:
MURPHY, PATRICK E, , ,		x Oppose	Presid	dent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7	97477.03	Disburseme	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures.				81609.76
(a) SUBTOTAL of Unitemized Independent Expenditure	∋s		•	
(a) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Buchanan, Emily, , ,	Electronically File	[ed]	M M /	17 2017
Signature		Date	9 05	2017

FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ WOMEN SPEAK OUT PAC C00530766 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee Headway Workforce Solutions 10 27 2016 Mailing Address 421 Fayetteville St #1020 Amount State 2119.84 City Zip Code NC 27601 Transaction ID: SE.6801 Raleigh Date of Disbursement or Obligation Purpose of Expenditure Category/ Actual Mileage for canvassers 10/27-11/8 FL, had reported 002 15 2016 Type estimate of 5690.03 Name of Federal Candidate: Support Office Sought: House District: CLINTON, HILLARY RODHAM, , , Oppose **x** President Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 355970.89 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item **Headway Workforce Solutions** 2016 27 10 Mailing Address 421 Fayetteville St #1020 Amount 2119.84 City State Zip Code Transaction ID: SE.6803 Raleigh NC 27601 Date of Disbursement or Obligation Purpose of Expenditure Category/ Actual Mileage for canvassers 10/27-11/8 FL, had reported 002 15 2016 11 Type estimate of 5690.03 Name of Federal Candidate: Support Office Sought: House District: MURPHY, PATRICK E, , , FL X Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 99596.87 2016 Per Election for Office Sought Other (specify) ▶ 4239.68 (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Buchanan, Emily, , , [Electronically Filed] 17 2017 Date Signature

PAGE

60

OF

TEMIZED INDEPENDENT EXPENDITURES				PAGE 61 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766
				O
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020				
			Amour	nt
City	State	Zip Code		15774.12
Raleigh	NC	27601		action ID: SE.6806 of Disbursement or Obligation
Purpose of Expenditure Actual Payroll for canvassers 10/27-11/8 OH, had re estimate of 17299.50	ported	Category/ Type 001	м	11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	t: House District:
CLINTON, HILLARY RODHAM, , ,		× Oppose	x Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	371745.01	Disbursement	t For: Primary ✗ General ther (specify) ▶
Full Name of Payee		Memo	<u> </u>	of Public Distribution/Dissemination
Headway Workforce Solutions		□ Iviemo	Mem Bate 6	M / D D / Y Y Y Y
Mailing Address			— L	10 27 2016
421 Fayetteville St #1020			Amour	nt
City	State	Zip Code	— F.	15744.11
Raleigh	NC	27601		saction ID : SE.6808 of Disbursement or Obligation
Purpose of Expenditure Actual Payroll for canvassers 10/27-11/8 OH, had restimate of 17299.50	reported	Category/ Type 001	м	11 15 / 2016
Name of Federal Candidate:		Support	Office Sough	t: House District:
STRICKLAND, TED, , ,		x Oppose	Preside	ent Senate State: OH
Calendar Year-To-Date		74408.08	Disbursemen	t For: Primary 🗶 General
Per Election for Office Sought	7-1-1-5	74400.00	2016 O	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·			31518.23
(a) SUBTOTAL of Unitemized Independent Expenditure	œs		•	
(a) TOTAL Independent Expenditures			•	, , , , , , , ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Buchanan, Emily, , ,	[Electronically Fil	led1 _	M = M /	D D / Y Y Y Y
Signature		Date	e 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 62 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions		_	lг	10 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Amou	int
City	State	Zip Code	— Г.	698.65
Raleigh	NC	27601		saction ID : SE.6811 of Disbursement or Obligation
Purpose of Expenditure actual Mileage for canvassers 10/27-11/8 OH, had restimate of 2000.00	eported	Category/ Type 002		11 15 2016
Name of Federal Candidate:		Support	Office Soug	ht: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	x Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 7	372443.66	Disburseme 2016	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Amou	ınt
City	State	Zip Code	—г	2000.00
Raleigh	NC	27601		saction ID : SE.6813 of Disbursement or Obligation
Purpose of Expenditure Mileage estimate for canvassers 10/27-11/8 OH		Category/ Type 002		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
STRICKLAND, TED, , ,		x Oppose	Presid	lent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		76408.08	Disburseme	_ , _
TO Essential States	7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· [2698.65
(a) SUBTOTAL of Unitemized Independent Expenditure	'es		· [
(a) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically Fil	ed]	M = M /	17 2017
Signature		Date	9 05	2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 63 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766
				C coccordo
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	f Public Distribution/Dissemination
Headway Workforce Solutions				10 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Amour	nt
City	State	Zip Code		12955.27
Raleigh	NC	27601	Transa	action ID : SE.6816
Purpose of Expenditure				f Disbursement or Obligation
Actual Canvasser Payroll for 10/27-11/8 MO, had re estimate of 17469.75	ported	Category/ Type 001		11 15 / 2016
Name of Federal Candidate:		Support	Office Sough	t: District:
CLINTON, HILLARY RODHAM, , ,		✗ Oppose	x Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 7	385398.93	Disbursement 2016	t For: Primary X General ther (specify) ▶
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Headway Workforce Solutions			М	10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020				10 27 2010
4211 ayelleville St #1020			Amour	nt
City	State	Zip Code	-1:	12955.58
Raleigh	NC	27601		action ID : SE.6818 f Disbursement or Obligation
Purpose of Expenditure Actual Canvasser Payroll for 10/27-11/8 MO, had r estimate of 17469.75	eported	Category/ Type 001	М	11 15 / 2016
Name of Federal Candidate:		Support	Office Sough	t: House District:
KANDER, JASON, , ,		x Oppose	Preside	ent Senate State: MO
Calendar Year-To-Date		94200.02	Disbursement	For: Primary General
Per Election for Office Sought	1 1	84299.93	2016 O	ther (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				25910.85
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Buchanan, Emily, , ,	[Electronically Fil	lød1	M = M /	
Signature		Date	e 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 64 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
				C 600330700
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Am	ount
City	State	Zip Code	$ +$ Γ	1578.98
Raleigh	NC	27601		ansaction ID : SE.6820 te of Disbursement or Obligation
Purpose of Expenditure Actual Canvasser Mileage for 10/27-11/8 MO, had estimate of 1763.13	reported	Category/ Type 002		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: House District:
CLINTON, HILLARY RODHAM, , ,		× Oppose	✗ Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	386977.91	Disbursen 2016	nent For: Primary X General Other (specify) ▶
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Δm	ount
	Τ-	I		
City Raleigh	State	Zip Code 27601		ansaction ID : SE.6822 te of Disbursement or Obligation
Purpose of Expenditure Actual Canvasser Mileage for 10/27-11/8 MO, had estimate of 1763.13	I reported	Category/ Type 002		11 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ught: House District:
KANDER, JASON, , ,		Oppose	Pres	sident Senate State: MO
Calendar Year-To-Date Per Election for Office Sought	T	85878.91	Disbursen 2016	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures				3157.96
(a) SUBTOTAL of Unitemized Independent Expenditure	es		· • _	
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically Fil	led1 -	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	omoung I'll	Date	e 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES	•			PAGE 65 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y Y
Full Name of Payee		Memo	Item Date of	of Public Distribution/Dissemination
Headway Workforce Solutions			N	10 27 Y 2016
Mailing Address 421 Fayetteville St #1020			Amou	nt
City	State	Zip Code		994.60
Raleigh	NC	27601		action ID : SE.6825 of Disbursement or Obligation
Purpose of Expenditure Actual Canvasser Payroll for 10/27-11/8 UT, had re estimate of 2276.25	ported	Category/ Type 001	_ N	111 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sough	nt: X House District: 04
LOVE, MIA, , ,		Oppose	Preside	ent Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	7 7	52402.97	Disbursemen 2016	nt For:
Full Name of Payee		Memo	l _	of Public Distribution/Dissemination
Headway Workforce Solutions			N	1 M / D D / Y Y Y Y
Mailing Address			L	10 27 2016
421 Fayetteville St #1020			Amou	nt
City	State	Zip Code	-	994.60
Raleigh	NC	27601		saction ID : SE.6827 of Disbursement or Obligation
Purpose of Expenditure Actual Canvasser Payroll for 10/27-11/8 UT, had r estimate of 2276.25	eported	Category/ Type 001	N	11 / 15 / 2016
Name of Federal Candidate:		x Support	Office Sough	nt: 🗶 House District: 04
LEE, MIKE, , ,		Oppose	Preside	ent Senate State: UT
Calendar Year-To-Date		52207 57	Disbursemen	t For: Primary 🗶 General
Per Election for Office Sought	7 7	53397.57	2016 _ o	other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3			1989.20
(a) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	•		·
Buchanan, Emily, , ,	[Electronically Fil	led1	M - M /	D D / Y N Y N Y N Y
Signature	_Г ълеси описану F и	Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 66 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee Headway Workforce Solutions		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 421 Fayetteville St #1020			Amo	10 27 2016
City	State	Zip Code	— г	216.59
Raleigh	NC	27601		nsaction ID : SE.6829 of Disbursement or Obligation
Purpose of Expenditure Actual Canvasser mileage for 10/27-11/8 UT, had restimate of 758.75	eported	Category/ Type 002		11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ght: X House District: 04
LOVE, MIA, , ,		Oppose	Presi	dent Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	7	53614.16	Disburseme 2016	ent For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Headway Workforce Solutions				10 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 421 Fayetteville St #1020			Amo	unt
City	State	Zip Code		216.59
Raleigh	NC	27601		nsaction ID : SE.6831 of Disbursement or Obligation
Purpose of Expenditure Actual Canvasser mileage for 10/27-11/8 UT, had estimate of 758.75	reported	Category/ Type 002		11 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 04
LEE, MIKE, , ,		Oppose	Presi	dent Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	7	53830.75	Disburseme 2016	ent For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures			· -	433.18
(a) SUBTOTAL of Unitemized Independent Expenditure	res		· -	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically Fil	ed1	M = M	/ D D / Y Y Y Y Y
Signature	гиси опичину 1° Ш	_ Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 67 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		*M / D *D / Y *Y *Y *Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Hyatt House Sandy			N	11 05 Y Y Y Y Y Y Y Y Y
Mailing Address 9685 S Monroe St			Amou	nt
City	State	Zip Code		8750.00
Sandy	UT	84070		action ID : SE.6853 If Disbursement or Obligation
Purpose of Expenditure Loding for canvassing deployment 11/5-11/6		Category/ Type 002	N.	11 05 7 2016
Name of Federal Candidate:		X Support	Office Sough	t: House District:
LEE, MIKE, , ,		Oppose	Preside	ent X Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	7 7	23052.70	Disbursemen 2016	t For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Hyatt Place Blue Ash			TN.	10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11435 Reed Hartman Hwy			Amou	nt
			7411041	
City Blue Ash	State	Zip Code 45241		3000.00 saction ID : SE.6773
Purpose of Expenditure		Cotogony		of Disbursement or Obligation
Lodging for canvasser deployment		Category/ Type 002		10 29 2016
Name of Federal Candidate:		Support	Office Sough	t: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	X Preside	ent Senate State:
Calendar Year-To-Date		269616.76	Disbursemen	t For: Primary 🗶 General
Per Election for Office Sought	7 7	200010.110	2016 🗌 C	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [11750.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically Fil	ed1	M = M /	
Signature	<u> гасионици</u> Ги	_ Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 68 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼ C C00530766
				C C00330700
Check if 24-hour report 48-hour report	New repo	ort Amends repo		/ B D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Hyatt Place Blue Ash				10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11435 Reed Hartman Hwy			Amou	unt
Cita	Ctoto	7:n Codo		3000.00
City Blue Ash	State	Zip Code 45241	Trans	saction ID : SE.6776
Purpose of Expenditure	<u> </u>		Date	of Disbursement or Obligation
lodging for canvasser deployment		Category/ Type 002		10 29 7 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
STRICKLAND, TED, , ,		✗ Oppose	Presid	dent 🗶 Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	55413.97	Disbursemer 2016	nt For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Hyatt Place Blue Ash				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11435 Reed Hartman Hwy				
,			Amou	ınt
City	State	Zip Code		8750.00
Blue Ash	OH	45241		of Disbursement or Obligation
Purpose of Expenditure Lodgng for canvassing deployment 11/5-11/6		Category/ Type 002		11 05 7 2016
Name of Federal Candidate:		✗ Support	Office Sough	ht: House District: 04
LOVE, MIA, , ,		Oppose	Presid	dent Senate State: UT
Calendar Year-To-Date		35158.37	Disbursemer	nt For: Primary X General
Per Election for Office Sought	7 7	00100.07	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i			11750.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res			7 1 7 1 7
(a) TOTAL Independent Expenditures			•	. , ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		
Buchanan, Emily, , ,	[Electronically File	ledl _	M = M /	D D / Y Y Y Y Y
Signature		Date	e 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 69 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
WOMEN SPEAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Orbitz				11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 500 W. Madison St			Aı	mount
Suite 1000		T =	— г	077000
City	State	Zip Code	Į	3750.00
Chicago	IL	60661		ransaction ID : SE.6864 ate of Disbursement or Obligation
Purpose of Expenditure Flights for canvassing deployment 11/5-11/6		Category/ Type 002		11 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office So	ought: 🗶 House District:04
LOVE, MIA, , ,		Oppose		esident Senate State: UT
Calendar Year-To-Date Per Election for Office Sought	7 7	47658.37	Disburse 2016	ement For: Primary X General Other (specify) ▶
Full Name of Payee		Memo	Item D	ate of Public Distribution/Dissemination
Orbitz				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 500 W. Madison St				11 03 2010
Suite 1000			Ai	mount
City	State	Zip Code		3750.00
Chicago	IL	60661		ransaction ID : SE.6867 ate of Disbursement or Obligation
Purpose of Expenditure Flights for canvassing deployment 11/5-11/6		Category/ Type 002		M 11
Name of Federal Candidate:		x Support	Office So	ought: House District:
LEE, MIKE, , ,		Oppose	Pr	esident X Senate State: UT
Calendar Year-To-Date		35552.70		ement For: Primary X General
Per Election for Office Sought	7 7	33332.70	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	7500.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Buchanan, Emily, , ,	[Electronically Fil	adl	M = M	/ D D / Y Y Y Y Y
Signature	при применти при применения приме	_ Date	05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 70 OF 78
NAME OF COMMITTEE (In Full)			-	FOR LINE 24 OF FORM 3X EC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
				C
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Priceline.com			1	
Mailing Address 800 Conneticut Ave			Amount	
City	State	Zip Code		3750.00
Norwalk	СТ	06854		ction ID : SE.6860
Purpose of Expenditure Flights for canvassing deployment 11/5-11/6		Category/ Type 002	М	
Name of Federal Candidate:				V House District: 04
LOVE, MIA, , ,		Support Oppose	Office Sought: Presiden	A House District.
Calendar Year-To-Date			Disbursement	
Per Election for Office Sought	1 1	43908.37	2016 Oth	er (specify) >
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Priceline.com			M 1	1 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 800 Conneticut Ave			Amount	
			Amount	
City Norwalk	State	Zip Code	Transa	3750.00 ction ID : SE.6862
	СТ	06854		Disbursement or Obligation
Purpose of Expenditure Flights for canvassing deployment 11/5-11/6		Category/ Type 002	1	1 05 7 2016
Name of Federal Candidate:		✗ Support	Office Sought:	House District:
LEE, MIKE, , ,		Oppose	Presiden	t Senate State: UT
Calendar Year-To-Date		31802.70	Disbursement	For: Primary General
Per Election for Office Sought	7 7		Oth	er (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	;		>	7500.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
				7
(a) TOTAL Independent Expenditures			>	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Buchanan, Emily, , ,	[Electronically File	led1 -		D D / Y Y Y Y Y
Signature	.2	Date	9 05	17 2017

TEMIZED INDEFENDENT EXPENDITORES	•			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date of	Public Distribution/Dissemination
The Lukens Company				11 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2800 Shirlington Rd			Amoun	
City	State	Zip Code		25000.00
Arlington	VA	22206	I	ction ID : SE.6761 Disbursement or Obligation
Purpose of Expenditure Voter Mail- MO		Category/ Type 004	М	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought	: House District:
CLINTON, HILLARY RODHAM, , ,		X Oppose	x Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	294616.76	Disbursement 2016 Otl	For:
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
The Lukens Company				11 01 / 2016
Mailing Address 2800 Shirlington Rd			Amount	
			Amoun	
City	State	Zip Code		25000.00
Arlington	VA	22206	I	action ID : SE.6763 Disbursement or Obligation
Purpose of Expenditure Voter Mail- MO		Category/ Type 004	М	11 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought	: House District:
KANDER, JASON, , ,		x Oppose	Preside	nt Senate State: MO
Calendar Year-To-Date Per Election for Office Sought	7	70368.46	Disbursement 2016 Otl	For: Primary X General her (specify) ▶
·			•	
(a) SUBTOTAL of Itemized Independent Expenditure	3		•	50000.00
(a) SUBTOTAL of Unitemized Independent Expenditu	ires		· .	7
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•		•
Buchanan, Emily, , ,	[Electronically File	ed] Date	m m / 05	17 2017
Signature	-	_ Date	, 55	20

I LIVIIZED INDER	- LINDLINI LAFLINDITORES	,			PAGE /2 OF /8
NAME OF COMMIT	TEE (In Eull)				FOR LINE 24 OF FORM 3X
	EAK OUT PAC				FEC IDENTIFICATION NUMBER ▼
WOWLN SFL	.AR OUT FAC				C C00530766
Check if 24-hou	r report 48-hour report	New repo	ort Amends repo	ort filed o	on M M / D D / Y Y Y Y Y
Full Name of Pa	yee		☐ Memo	Item	Date of Public Distribution/Dissemination
Thrifty Car R	Cental 				10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address	1534 Sunset Blvd				Amount
City		State	Zip Code	$\overline{}$	367.46
Steubenville		ОН	43952		Transaction ID : SE.6649 Date of Disbursement or Obligation
Purpose of Expe Van rental for ca			Category/ Type 002		10 / 22 / Y Y Y Y Y Y Z 2016
Name of Federal	l Candidate:		Support	Office	Sought: House District:
CLINTON, HILLA	ARY RODHAM, , ,		x Oppose		President Senate State:
Calendar Ye Per Election	ear-To-Date n for Office Sought		252164.78	Disbur 2016	rsement For:
Full Name of Pa			☐ Memo	Item	Date of Public Distribution/Dissemination
Thrifty Car I	Rental				10 22 7 2016
Mailing Address	1534 Sunset Blvd				Amount
City		State	Zip Code		367.46
Steubenville		ОН	43952		Transaction ID : SE.6651 Date of Disbursement or Obligation
Purpose of Expe Van rental for o			Category/ Type 002		10 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal	l Candidate:		Support	Office	Sought: House District:
STRICKLAND, T	ED, , ,		X Oppose		President Senate State: OH
Calendar Ye	ear-To-Date		50461.99	Disbur	rsement For: Primary X General
1 el Election	1 for Office Sought	7			Other (specify) ▶
(a) SUBTOTAL of	Itemized Independent Expenditures	3		. •	734.92
(a) SUBTOTAL of	Unitemized Independent Expenditu	ires		. •	
(a) TOTAL Indepe	endent Expenditures			. •	
with, or at the rec		ate or authorized	•		de in cooperation, consultation, or concert, or (if the reporting entity is not a political
Buchanan, Emi	ily, , ,	[Electronically File	ded] Date	e 05	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature			_		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 73 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		= M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Thrifty Car Rental				10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1534 Sunset Blvd			Amou	ınt
City	State	Zip Code		183.73
Steubenville	ОН	43952		saction ID : SE.6657 of Disbursement or Obligation
Purpose of Expenditure Van rental for canvassers		Category/ Type 002		10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	ht: House District:
CLINTON, HILLARY RODHAM, , ,		X Oppose	✗ Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	252616.76	Disbursemer 2016	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Thrifty Car Rental			Г	10 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1534 Sunset Blvd				
			Amou	int
City	State	Zip Code		183.73
Steubenville	ОН	43952		saction ID : SE.6659 of Disbursement or Obligation
Purpose of Expenditure Van rental for canvassers		Category/ Type 002		10 23 7 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
STRICKLAND, TED, , ,		x Oppose	Presid	lent Senate State: OH
Calendar Year-To-Date		50913.97	Disburseme	nt For: Primary General
Per Election for Office Sought	7 7	00010.01	2016	Other (specify) ▶
(a) SUBTOTAL of Uniterprized Independent Expenditures				367.46
(a) SUBTOTAL of Unitemized Independent Expenditure	res		·	
(a) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	[Electronically Fil	adl	M = M /	D D / Y T Y T Y
Signature	_г исионишцу Г ll	_ Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 74 OF 78
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		=M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Thrifty Car Rental				10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1534 Sunset Blvd			Amou	int
City	State	Zip Code	—Г	1500.00
Steubenville	ОН	43952		saction ID : SE.6766 of Disbursement or Obligation
Purpose of Expenditure Van rental for Canvasser deployment		Category/ Type 002		10 29 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
CLINTON, HILLARY RODHAM, , ,		X Oppose	✗ Presid	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 7	266616.76	Disbursemei 2016	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Thrifty Car Rental				10 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1534 Sunset Blvd				
			Amou	int
City	State	Zip Code		1500.00
Steubenville	ОН	43952		saction ID : SE.6768 of Disbursement or Obligation
Purpose of Expenditure Van Rental for Canvasser deployment		Category/ Type 002		10 29 7 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
STRICKLAND, TED, , ,		x Oppose	Presid	ent Senate State: OH
Calendar Year-To-Date		52413.97	Disburseme	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	02110.01	2016	Other (specify) ▶
(a) SUBTOTAL of Uniterprized Independent Expenditures				3000.00
(a) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(a) TOTAL Independent Expenditures			•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically Fil	adl	M = M /	D D / Y T Y T Y
Signature	<u> гасионици</u> Ги	_ Date	9 05	17 2017

TEMIZED INDEPENDENT EXPENDITURES				PAGE 75 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				
				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Thrifty Car Rental			Г	11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1534 Sunset Blvd			Amou	int
			Alliot	
City	State	Zip Code	<u> </u>	1500.00
Steubenville	OH	43952		saction ID : SE.6881 of Disbursement or Obligation
Purpose of Expenditure Van Rental for canvassing deployment 11/5-11/6		Category/ Type 002		11 05 7 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
CLINTON, HILLARY RODHAM, , ,		x Oppose	x Presid	
Calendar Year-To-Date		2222.12.25	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	7-1-1-7-	298842.65	2016	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Thrifty Car Rental			_ I	11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1534 Sunset Blvd				11 03 2010
1334 Guildet Blvd			Amou	int
City	State	Zip Code	— I I :	1500.00
Steubenville	ОН	43952		saction ID : SE.6883 of Disbursement or Obligation
Purpose of Expenditure	-1	Category/		M M / D D / Y Y Y
Van Rental for canvassing deployment 11/5-11/6		Type 002	_	11 05 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
STRICKLAND, TED, , ,		x Oppose	Presid	ent Senate State: OH
Calendar Year-To-Date		58663.97	Disburseme	nt For: Primary X General
Per Election for Office Sought	7 7	30003.97	2016	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· [3000.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es		· [
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Buchanan, Emily, , ,	Electronically Fil	od1	M = M /	
Signature	nationally 1'll	_ Date	9 05	17 2017

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 76 OF 78	
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼	
WOMEN SPEAK OUT PAC					
				C C00530766	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee		☐ Memo	Item Dat	e of Public Distribution/Dissemination	
WestFax, Inc.				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 9200 E. Mineral Ave			Am	ount	
Suite 725		l =:		750.00	
City	State	Zip Code		750.00	
Centennial	OH	80112		nsaction ID : SE.6834 e of Disbursement or Obligation	
Purpose of Expenditure Robocalls		Category/ Type 004		11 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate:		X Support	Office Sou	ight: X House District: 04	
LOVE, MIA, , ,		Oppose		sident Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought	7 7	26408.37	Disbursem 2016	nent For:	
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination	
WestFax, Inc.				M M / D D / Y Y Y Y	
Mailing Address				11 05 2016	
9200 E. Mineral Ave			Am	ount	
Suite 725 City	State	Zip Code	— Г	975.89	
Centennial	ОН	80112	I	Transaction ID : SE.6838 Date of Disbursement or Obligation	
Purpose of Expenditure Robocalls, originally reported as \$1250, this is actu	ual	Category/ Type 004		11 05 2016	
Name of Federal Candidate:		Support	Office Sou	ight: House District:	
KANDER, JASON, , ,		x Oppose	Pres	sident Senate State: MO	
Calendar Year-To-Date		7101105	Disbursem	ent For: Primary 🗶 General	
Per Election for Office Sought	7 7	71344.35	2016	Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditu				1725.89	
(a) SOBTOTAL of Onliethized independent Expenditu	res		• •		
(a) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized				
Buchanan, Emily, , ,	[Electron: II-: T'	la J I	M = M	/ D D / Y T Y T Y	
Signature	[Electronically Fil	eaj Date	9 05	17 2017	

TEMIZED INDEPENDENT EXPENDITORES				PAGE 77 OF 78 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
WOMEN SPEAK OUT PAC				C C00530766
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date	te of Public Distribution/Dissemination
WestFax, Inc.		_		11 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9200 E. Mineral Ave			Am	ount
Suite 725	Otata	Zin Codo	— г	2225 90
City Centennial	State OH	Zip Code 80112		2225.89 ansaction ID : SE.6841
Purpose of Expenditure Robocalls, originally reported as \$2500, this is actua	I	Category/ Type 004		te of Disbursement or Obligation 11 05 2016
Name of Federal Candidate:		Support	Office Soi	ught: House District:
ROSS, DEBORAH K, , ,		▼ Oppose		sident X Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	, , ,	64129.44	Disbursen 2016	nent For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination
WestFax, Inc.		_		11 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 9200 E. Mineral Ave				
Suite 725			Am	ount
City Centennial	State OH	Zip Code 80112		975.89 ansaction ID : SE.6844
Purpose of Expenditure Robocalls, originally reported as \$1250, this is actu-	al	Category/ Type 004		te of Disbursement or Obligation 11 05 2016
Name of Federal Candidate:		Support	Office Soi	ught: House District:
CLINTON, HILLARY RODHAM, , ,		X Oppose	X Pres	sident Senate State:
Calendar Year-To-Date Per Election for Office Sought		295592.65	Disbursen 2016	
, ,	1			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	3201.78
(a) SUBTOTAL of Unitemized Independent Expenditure	es			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Buchanan, Emily, , ,	Electronically Fil	ed]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 05	17 2017

FEMIZED INDEPENDENT EXPENDITURES				PAGE 78 OF 78 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
WOMEN SPEAK OUT PAC					
				C C00530766	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination	
WestFax, Inc.				M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y	
Mailing Address 9200 E. Mineral Ave			A		
Suite 725			Amo	ount	
City	State	Zip Code		975.89	
Centennial	ОН	80112		nsaction ID : SE.6846 e of Disbursement or Obligation	
Purpose of Expenditure Robocalls, originally reported as \$1250, this is actual	al	Category/ Type 004	_	11 05 2016	
Name of Federal Candidate:		Support	Office Sou	ght: House District:	
MURPHY, PATRICK E, , ,		X Oppose	Presi		
Calendar Year-To-Date Per Election for Office Sought	7	56672.15	Disburseme	ent For: Primary X General Other (specify) ▶	
Full Name of Payee		☐ Memo	1_	e of Public Distribution/Dissemination	
,				M M / D D / Y Y Y Y	
Mailing Address					
			Amo	punt	
City	State	Zip Code			
			Date	e of Disbursement or Obligation	
Purpose of Expenditure		Category/ Type		M = M / D = D / Y = Y = Y	
Name of Federal Candidate:		Support	Office Sou	ght: House District:	
		Oppose	Presi	dent Senate State:	
Calendar Year-To-Date			Disburseme	ent For: Primary General	
Per Election for Office Sought	7			Other (specify) ▶	
			I.		
(a) SUBTOTAL of Itemized Independent Expenditures	;		· -	975.89	
(a) SUBTOTAL of Unitemized Independent Expenditu	res		· [7	
(a) TOTAL Independent Expenditures			•	334209.98	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Buchanan, Emily, , ,	[Electronically Fil	led] Date	e 05	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature			, 55		